

Bill No. 72 of 1946

A BILL TO PROVIDE HEALTH SERVICES FOR
THE PEOPLE OF ALBERTA.

NOTE.

This Bill introduces a new Act authorizing the setting up of health insurance districts which will furnish to the residents various medical and hospital services as the same are organized from time to time.

Section 3 provides for the appointment of a Director of Health Insurance and other necessary officers and clerks.

Section 4 sets out the services which or one or more of which may be furnished from time to time as conditions warrant. To prevent duplication exceptions are made in the case of medical, etc., services received under *The Workmen's Compensation Act* and *The Tuberculosis Act*. In subsection (2) of Section 4 are set out the persons qualified to receive benefits under the Act, namely, adults who have paid the prescribed annual fee and who reside in a health insurance district and have resided twelve months in the Province, also the dependants of adults and persons (such as indigents) on whose behalf the fee has been paid and for whom a municipality is responsible. Who are adults is to be determined by Order in Council under paragraph (a) of section 2 and paragraph (d) of section 5 (1).

Section 5 confers on the Minister, with the approval of the Lieutenant Governor in Council, various powers connected with the administration of the Act including the appointment of an Advisory Committee, the making of agreements with municipalities, the fixing of an annual fee for adults and the age when residents become liable for the fee, the making of agreements with physicians, hospitals, etc., the making of agreements with the Government of Canada as to the application of the grants which may be made by that Government to the Province for health services, the appointment of referees, etc., to settle disputes, and various other matters of detail. In the same section, the Minister, with the approval of the Lieutenant Governor in Council, is authorized to make regulations dealing with matters of procedure in making and keeping a register of adults, etc.

Section 6 deals with the establishment of health insurance districts, the preparation of a scheme by the Director, the advertising of same, and its submission to a vote of the qualified residents of the district and the procedure to be adopted in taking the vote.

Section 7 gives the qualifications of voters and the form of the ballot and directions as to voting, etc., and provides that sixty per cent of those voting are required to vote for the scheme to ratify it. Subsection (9) of section 7 provides that where a scheme after ratification is expanded as by services being provided additional to those in the original scheme, this expansion of the scheme shall be submitted to the voters.

Section 8 provides for a vote being taken in an area proposed to be added to a health insurance district which vote will require a sixty per cent vote in the area to authorize its addition.

By section 9 it is provided that where a scheme has been rejected by the voters after the expiration of three months, any area may be detached or added and a second vote taken on the scheme.

Section 10 (1) declares who are entitled to vote at a vote taken under sections 8 or 9 and subsection (2) provides an oath which may be administered to any person presenting himself as a voter at any vote taken under the Act.

Section 11 deals with the disestablishment of a district before and after a vote has been taken. Procedure is provided for disestablishment after a district has been in operation for a year. Subsection (3) authorizes a vote on the petition of twenty-five per cent of adults residing in the district and entitled to the benefits of the Act. A sixty per cent vote is required to disestablish the district under this subsection.

Section 12 provides the procedure to be taken after a scheme has been ratified by the voters. A census is to be taken at the instance of the Director of each municipality included in whole or in part in the health insurance district of all persons residing in each municipality who are entitled to the benefits of the Act under section 4, the census to distinguish between adults and others; on completion the appropriate portion of the census is to be sent to each municipality concerned, and the secretary of each is required to prepare a register of the adults and dependants in the municipality. Provision is also made for the amendment of the register from year to year.

Section 13 provides for the payment by the municipality to the Minister annually of a sum obtained by multiplying the number of adults whose names appear on the list and register by the amount of the annual fee fixed by the scheme, such payment to be after the first year in quarterly instalments and if they remain unpaid after they fall due, they become debts to the Minister recoverable by action. If paid when due, the municipality is to retain three per cent of the amount due as compensation for the service rendered. Subsection (4) of section 13 provides that adults entitled to the benefits of the Act become indebted to the municipality in which they reside for the annual fee as fixed under the

Act, which, in the case of persons on the assessment roll, may be added to the taxes, and in all cases, the amount becomes a debt due to the municipality recoverable by action.

Section 14 deals with the setting up of an account in the Treasury Department for each health insurance district and with the investment of any surplus funds of the district.

Section 15 provides that the Director or any person appointed by him to make any investigation relating to the setting up or administration of a health insurance district shall have the powers given under *The Public Inquiries Act* set out in the section.

Section 16 enacts a penal clause as to giving false information to a municipality or to the Director or any other official of the district or as to withholding information on an investigation under the Act.

Section 17 provides penalties for failure to provide adequate services without lawful excuse by persons who have made agreements with the Minister for such services.

Section 18 protects such persons from civil action where failure to provide services is due to inability to obtain equipment, etc.

Subsection (2) of section 19 provides that where a scheme or other proposal is ratified by the voters, the cost of taking the vote shall be paid out of the funds of the health insurance district but otherwise out of the general organization grant.

W. S. GRAY,
Legislative Counsel.

(This note does not form any part of the Bill but is offered in explanation of its provisions.)

BILL

No. 72 of 1946

An Act to Provide Health Services for the People of Alberta.

(Assented to _____, 1946)

HIS MAJESTY, by and with the advice and consent of the Legislative Assembly of the Province of Alberta, enacts as follows:

SHORT TITLE.

1. This Act may be cited as "*The Alberta Health Insurance Act, 1946.*"

INTERPRETATION.

2. In this Act unless the context otherwise requires,—

- (a) "Adult" means any person who has attained the age fixed by the Lieutenant Governor in Council as the age when a person entitled to the benefit of this Act shall pay an annual fee;
- (b) "Director" means the Director of Health Insurance appointed pursuant to the provisions of this Act;
- (c) "Health Insurance District" means a health insurance district established under the provisions of this Act;
- (d) "Minister" means the Minister of Health;
- (e) "Municipality" means any city, town, village, municipal district, and includes, in respect of an improvement district, the Minister of Municipal Affairs, and in respect of a special area, the Minister of Lands and Mines;
- (f) "Register" means the register kept by a municipality of persons entitled to the benefit of this Act.

3. Subject to the provisions of *The Public Service Efficiency Act*, the Lieutenant Governor in Council may from time to time appoint a Director of Health Insurance and such other officers and clerks as may be required to administer the provisions of this Act, all of whom shall hold office during pleasure.

4.—(1) The benefits to be provided under this Act shall be the prevention of disease and the application of all necessary diagnostic and curative procedures, and without limiting the generality of the foregoing, but subject to the other provisions of this Act and the regulations, shall include all or any one or more of the following benefits,—

- (a) medical, surgical and obstetrical benefits;
- (b) dental benefit;
- (c) pharmaceutical benefit;
- (d) hospital benefit;
- (e) nursing benefit;

which shall be provided from time to time in whole or in part as health insurance districts are established in the Province pursuant to the provisions of this Act, and as the conditions prevailing from time to time warrant the extension of the services provided and the establishment of health insurance districts.

Provided that any person in receipt of benefits under *The Tuberculosis Act* or *The Workmen's Compensation Act* shall not be entitled to receive benefits under this Act with respect to the services which they are receiving under the said Act.

(2) The persons entitled to the benefit of this Act are,—

- (a) any adult who resides in a health insurance district established pursuant to this Act at the date upon which his name is placed upon the register as hereinafter provided and who has resided in the Province for twelve months out of the twenty-four months immediately preceding such date and has paid to the municipality the annual fee for the current year as hereinafter provided;
- (b) each dependant of an adult, provided the dependant is not himself an adult;
- (c) any person on whose behalf the annual or registration fee has been paid or for whom the municipality in which he resides is liable under the provisions of the appropriate municipal Act governing the municipality.

5.—(1) The Minister, subject to the approval of the Lieutenant Governor in Council, is hereby authorized to,—

- (a) appoint an advisory committee consisting of not less than seven nor more than eleven members who shall hold office during pleasure, representing the persons or corporations which provide services under this Act, and the classes of persons who receive the benefits hereunder, the duty of which committee shall be to advise the Minister and the Director in the administration of this Act, and the members of which shall not be paid any remuneration for their services but shall be reimbursed for their expenses in the manner determined by the Lieutenant Governor in Council;
- (b) make regulations as to the times and places for meetings of the advisory committee and as to the conduct of the meetings;
- (c) enter into agreements with any municipality or other authority with a view to the provision of services provided for in this Act;

- (d) fix an annual fee not exceeding ten dollars to be paid by each adult resident of a health insurance district who is entitled to the benefits of this Act pursuant to the provisions of subsection (2) of section 4, and to fix the age of residents at which the liability for such fee shall begin;
- (e) enter into agreements with physicians, surgeons, dentists, hospitals, and any other persons or corporations for the provision of services under this Act;
- (f) enter into agreements with the Government of Canada as to the manner in which any grants made by that Government to the Province in aid of,—
 - (i) planning and organization;
 - (ii) health insurance;
 - (iii) public health;
 - (iv) construction of hospitals; or
 - (v) health services of any kind;
 shall be applied and to formulate and put into effect any projects necessary to take advantage of the aforesaid grants;
- (g) provide a referee or a board of reference in each health insurance district to deal with disputes between a doctor or a hospital or other person or corporation furnishing services and a patient; and providing for an appeal in a summary manner by either party to the dispute to a District Court Judge having jurisdiction in the area in which the patient resides, and providing the procedure to be adopted on such appeal;
- (h) prescribe the records which shall be kept by the Director, municipalities and other authorities and the necessary forms for the keeping of such records;
- (i) prescribe the standards of service to be provided;
- (j) provide for the inspection of the services being rendered to persons entitled to the benefits of this Act and of the records kept relative thereto;
- (k) enter into agreements with other Provinces to provide for persons temporarily absent from Alberta while entitled to the benefits of this Act;
- (l) make regulations,—
 - (i) as to the method of taking a census under the Act, and the preparation, amendment and keeping of the register;
 - (ii) as to the proof required as to whether any adult or any dependant of an adult who is not himself an adult is entitled to the benefits of this Act, and as to the procedure to be adopted in determining whether or not they are so entitled;
 - (iii) governing the reference for consideration and advice of questions arising under the Act to the advisory committee and the procedure to be

adopted by a referee or board of reference as to a dispute between a patient and any person providing services to him;

- (iv) generally for carrying the Act into effect, prescribing the procedure to be followed in any proceeding under the Act, and making such incidental and supplemental provisions as appear necessary for the proper carrying out of the true intent of the Act and providing for any event or contingency for which no express provision is made, including, except where otherwise provided, the procedure on taking a poll hereunder and the fees to be paid to officials and others in connection with the taking of a poll;

- (m) do such other things as may be necessary to carry out the purposes of this Act.

(2) Every regulation made pursuant to this section shall be published in *The Alberta Gazette* and shall take effect upon publication or upon such later date as may be specified in the order approving any such regulation.

6.—(1) The Director, with the approval of the Minister, may by order from time to time establish health insurance districts in the Province to which and to the residents of which, subject to the provisions of section 4 and of subsection (3) of this section, the provisions of this Act shall apply, and in the order shall give the district a name and determine its area.

(2) Upon the establishment of a health insurance district, the Director shall prepare a scheme showing the services to be given to residents of the district, the estimated cost of same, the estimated cost of the taking of the vote, the sources of revenue, and the annual amount to be paid by each adult as defined in section 2 who is resident in the district and who has resided in the Province for twelve consecutive months out of the preceding twenty-four months, which scheme shall be advertised in such newspaper or newspapers published or circulated in the district and on such dates as the Director may direct.

(3) As soon as practicable after the expiration of fourteen days from the last publication of the notice required by subsection (2), the Director shall cause to be submitted to the voters of the health insurance district the scheme, for the purpose of obtaining a ratification or rejection of it, and shall appoint a returning officer who shall divide the district into polling divisions and name a polling place in each polling division and appoint a deputy returning officer for each polling division, and appoint the time and place when and where the returning officer shall sum up the votes given for and against the scheme.

(4) The returning officer shall give notice of the date of the poll and the situation of the various polling places in such papers circulating in the district as the Director shall

direct, and shall also post up notices to the like effect in such places as the Director shall direct, which advertisement shall be made or posted up at least fourteen clear days before the date of the poll.

7.—(1) The persons entitled to vote at a poll to ratify or reject the scheme for the health insurance district shall be all adults who are resident in the district and who have resided in the Province for twelve consecutive months out of the twenty-four months preceding the date fixed for the taking of the poll.

(2) The ballot shall be in the following form:

ARE YOU IN FAVOUR OF THE SCHEME OF THE
.....HEALTH INSURANCE DISTRICT

YES

NO

(3) If the voter is in favour of the health insurance scheme he shall make the mark **X** in the upper right hand blank space which appears opposite the word "Yes".

(4) If the voter is against the scheme, he shall make the mark **X** in the lower right hand blank space which appears opposite the word "No".

(5) No person shall vote in more than one polling division, and any person so voting shall be guilty of an offence and liable upon summary conviction to a penalty not exceeding one hundred dollars and costs, and not less than ten dollars and costs.

(6) The poll shall be taken in each polling division of the health insurance district, and all proceedings thereat and preliminary and subsequent thereto and for the purpose thereof shall, subject to the provisions of this Act, be conducted in the same manner as nearly as may be as at an election of councillors for a municipal district, or in the event of other directions being given by the Director, then in accordance with such directions.

(7) The provisions of *The Controverted Municipal Elections Act* shall be applicable to all elections held to ratify or reject a scheme for a health insurance district.

(8) If at least sixty per cent of the voters voting on the question vote in favour of the scheme, it shall be thereby ratified and the Act shall thereupon apply to the health insurance district and to its residents entitled to the benefits and subject to the obligations of the Act, and if less than sixty per cent of the voters voting on the question vote in favour of the scheme, it shall be rejected.

(9) If at any time subsequent to the approval of a scheme pursuant to this section the Director with the approval of the Minister decides that the scheme as approved may be expanded by the rendering in the health insurance district of additional services, such proposal shall be submitted as an amendment to the scheme to the voters of the health

insurance district and all the provisions of section 6 and of this section shall *mutatis mutandis* apply to the taking of the vote and the subsequent proceedings thereon.

8.—(1) The Director, with the approval of the Minister, may at any time after a scheme has been ratified, direct that a vote be taken with regard to the addition to a health insurance district of any area described in the direction, and the vote shall be taken in the area proposed to be added in the same manner as nearly as possible as if it were a poll to ratify or reject a scheme of the health insurance district, but the Director may give any contrary or other directions as to the taking thereof which may seem to him to be necessary or convenient.

(2) If upon the vote being taken it appears that sixty per cent of the persons actually voting in the area have voted in favour of the addition of the area to the district, the Director may, by order, include the area in the district.

9.—(1) In the event of the scheme of a health insurance district being rejected by the voters, the Director after the expiration of three months from the taking of the vote, with the approval of the Minister, may by order detach any area from or add any area to the health insurance district as established and direct a second vote to be taken by the voters in the health insurance district as newly constituted, and the provisions of section 8 shall *mutatis mutandis* apply to the taking of the vote.

(2) If upon the vote being taken it appears that sixty per cent of the persons actually voting in the health insurance district as altered have voted in favour of the scheme, it shall thereby be ratified and this Act shall apply to the health insurance district and its residents entitled to the benefits and subject to the obligations of the Act.

10.—(1) The persons entitled to vote at a poll taken under the provisions of sections 8 and 9 shall be all adults as defined in section 2 who are resident in the health insurance district as altered or in an area proposed to be added to the health insurance district, as the case may be, and who have resided in the Province for twelve consecutive months out of the twenty-four months preceding the day fixed for the taking of the poll.

(2) At any poll held under the provisions of this Act, when any person presents himself as a voter, the deputy returning officer before handing him a ballot may, of his own motion or at the request of any qualified voter at the poll, require him to take the oath set out in the Form in the Schedule to this Act.

11.—(1) The Director, with the approval of the Minister, may at any time after a health insurance district has been established, and before a vote has been taken, by order disestablish the district.

(2) If at any time after a health insurance district has been in actual operation for at least two years, the Director is satisfied by the presentation of petitions or otherwise that sixty per cent of the adults residing in the district and entitled to the benefits of this Act are not in favour of continuing the operation of the district or that it is in the public interest to disestablish the district, he may, with the approval of the Minister, by order disestablish the district, such order to be effective at a date to be fixed in the order, which date shall be not less than six months after the date of the issuing of the order.

(3) If at any time after a health insurance district has been in actual operation for at least one year, properly authenticated petitions are presented to the Director signed by at least twenty-five per cent of the adults residing in the district and entitled to the benefits of this Act asking that the district be disestablished, the Director may, with the approval of the Minister, by order direct a vote of the adults of the district entitled to the benefits of this Act upon the question as to whether or not the district should be disestablished and a vote shall be taken according to the provisions of this Act for the taking of a vote for the ratification or rejection of a scheme of a health insurance district, and all such provisions shall *mutatis mutandis* apply thereto.

(4) If a vote has been taken and the proposal for the disestablishment of the district has been approved by at least sixty per cent of the persons voting thereon, the Director shall by order disestablish the district, which order shall take effect on a date to be fixed in the order, which date shall be not less than six months after the date of the taking of the vote.

(5) Any order made pursuant to subsection (2) or subsection (4) shall be published, as soon as practicable, in *The Alberta Gazette*.

(6) The Director, with the approval of the Minister, may from time to time give such directions as he may deem proper as to the winding-up of the affairs of a disestablished district.

12.—(1) In this section “secretary-treasurer” means in the case of an improvement district, the Deputy Minister of Municipal Affairs, and in the case of a special area, the Secretary of the Special Areas Board.

(2) Upon the ratification of the scheme of a health insurance district or of the addition of an area to an established health insurance district, the Director shall make arrangements, as soon as possible, for the taking of a census of all persons residing in each municipality which is wholly or partially included in the district, or in the added area, as the case may be, who are entitled to the benefits of this Act pursuant to section 4, and the census so taken shall signify what persons on the list are adults, and upon the completion of the census of the health insurance district or of the added portion, as the case may be, the Director shall forward a

copy of the appropriate portion of it to the secretary-treasurer or the clerk of each municipality which is in whole or in part included in the district, and the secretary-treasurer or clerk of the municipality shall prepare therefrom a register of the adults residing in the municipality or portion of the municipality, as the case may be, entitled to the benefits of the Act and of the dependants of such adults residing in the municipality and entitled to the benefits of this Act.

(3) In each subsequent year as soon as practicable after the first of January, the secretary-treasurer or clerk of each municipality which is included in whole or in part in a health insurance district shall amend the said register by striking off the names of persons who have died or who have ceased to reside in the municipality, and by adding to the list of adults the names of all persons on the register who have become adults since the taking of the census or last amendment of the register, as the case may be, together with the names of persons who have become residents of the municipality since the taking of the census or last amendment of the register, as the case may be, and who are entitled to the benefits of this Act as adults or dependants.

(4) Immediately upon the completion in each year of the amended register, the secretary-treasurer of the municipality shall forward to the Director a copy of the register so amended.

(5) Any adult whose name has not been included in the register and who claims to be entitled to be registered may apply to the secretary-treasurer of the municipality to have his name and the names of his dependants placed on the register, and the secretary-treasurer, if satisfied after inquiry that the application should be granted, may add the names to the register, and the municipality shall thereupon become liable to the Minister for the fee payable by each adult.

13.—(1) Each municipality wholly or partially included in a health insurance district shall pay to the Minister in the year in which the district is established a sum equal to the amount obtained by multiplying the annual fee fixed by the scheme by the number of adults whose names appear as such on the list prepared pursuant to section 12 as residing in the municipality or the included part of the municipality, and who are entitled to the benefits of this Act, or a portion of that amount corresponding to the portion of the year between the date of the completion of the census and the end of the calendar year, and in any subsequent year, an annual sum of such amount as will equal the sum obtained by multiplying the annual fee fixed by the scheme by the number of adults resident in the municipality or the included part of the municipality and whose names appear on the register referred to in section 12 and who are entitled to the benefits of this Act.

(2) In the year of the establishment of the health insurance district, the annual sums so payable shall be paid in

three equal instalments, and the first instalment shall be paid immediately upon the completion of the census required to be made upon the establishment of a district and the receipt by the municipality of a copy of the appropriate portion of it and the balance on a date or dates to be agreed upon, the last instalment to be paid not later than the thirty-first day of December in that year, and in subsequent years, instalments shall be paid on the last days of March, June, September and December in each year, and any of such amounts remaining unpaid after the dates upon which they become due shall be recoverable as a debt due to the Minister in any court of competent jurisdiction.

(3) Each municipality which pays to the Minister any amount payable to the Minister on or before the date fixed for the payment thereof shall be entitled to a discount on the amount so payable and paid of three per cent by way of compensation for the expense incurred by the municipality under this Act.

(4) Each adult who is entitled to the benefits of this Act shall, upon payment by the municipality in which he resides to the Minister of the first instalment in any year of the payment hereinbefore provided for, become indebted to the municipality in the amount of the annual fee fixed by the scheme, which sum the municipality may recover as a debt in any court of competent jurisdiction, and if the name of the debtor is on the assessment roll, the said sum may be added annually to the tax roll in the name of the debtor and shall thereupon become and be a part of the taxes owing by the debtor to the municipality.

14.—(1) There shall be constituted in the Treasury Department with respect to each operating health insurance district a special account entitled "Provincial Treasurer's Health Insurance Account.....District", and all moneys received by the Minister from any municipality with respect to any district pursuant to the provisions of this Act shall be transferred upon receipt to the Provincial Treasurer for deposit to that account.

(2) All expenditures made under this Act with respect to a health insurance district in providing the services hereinbefore referred to and in fulfilling the agreements entered into with persons providing the services shall be paid by the Provincial Treasurer out of the special account set up for that district.

(3) Any surplus accumulated from time to time to the credit of any such account may be invested by the Provincial Treasurer in the securities in which he is authorized to invest money in a sinking fund pursuant to subsection (4) of section 4 of *The Provincial Loans Act*.

15. The Director or any person appointed by him to make any investigation in connection with the establishment of a health insurance district or in connection with the services rendered or to be rendered under this Act or in connection

with the operation of the Act shall have all the powers which may be conferred upon commissioners appointed under *The Public Inquiries Act* in compelling the attendance of witnesses and of taking evidence under oath for compelling the production of books, papers and other documents in relation to any inquiry held by the Director or other person appointed by him pursuant to this Act.

16. Any person who gives false information to a municipality or to the Director or any other official engaged in the administration of this Act in or with respect to an application to obtain the benefits provided by this Act or in an application to register under this Act, or any person who withholds information with respect to any matter which is being investigated pursuant to this Act shall be guilty of an offence and liable on summary conviction to a penalty not exceeding two hundred dollars or to imprisonment for a period not exceeding three months.

17. Any person who fails without lawful excuse to provide adequate service agreed to be given in any agreement with the Minister made pursuant to this Act shall be guilty of an offence and liable on summary conviction to a penalty not exceeding two hundred dollars or to imprisonment for a period not exceeding three months.

18. No action shall be brought against any person for failure to provide adequate service agreed to be provided pursuant to an agreement with the Minister where such failure is due to inability to obtain the necessary personnel or equipment, or where it is otherwise due to matters beyond the control of such persons.

19.—(1) The expenses of the administration of this Act shall be paid out of moneys appropriated by the Legislature for the purposes of the Department of Public Health.

(2) Where in any vote taken under the provisions of this Act a scheme or other proposal has been ratified by the voters, the cost of taking such vote shall be paid out of the health insurance funds of the district, but if the scheme or other proposal is not ratified, the cost of taking the vote shall be paid out of the General Organization grant.

20. *The Alberta Health Insurance Act*, being chapter 204 of the Revised Statutes of Alberta, 1942, is hereby repealed.

21. This Act shall come into force upon a date to be fixed by Proclamation of the Lieutenant Governor in Council.

SCHEDULE

The..... Health Insurance District.
 I,, of..... in
 the Province of Alberta....., do hereby
 (Occupation)

make oath and say as follows:

1. That I am of the full age of..... years.
2. That I reside at..... within the
 limits of the..... Health Insurance
 District and have resided in the Province of Alberta for at
 least twelve consecutive months out of the last twenty-four
 months.
3. That I have not voted before at the taking of this poll
 on the scheme of the..... Health Insurance
 District.

Sworn before me at..... }
 in the Province of Alberta, the }
 day of....., 19 .. }

.....
Deputy Returning Officer.

OR

(if the vote is on the addition of an area to the Health
 Insurance District)

The Health Insurance District.
 I,, of..... in the
 Province of Alberta....., do hereby
 (Occupation)

make oath and say as follows:

1. That I am of the full age of..... years.
2. That I reside at..... within the limits
 of the area proposed to be added to the.....
 Health Insurance District and have resided in the Province
 of Alberta for at least twelve consecutive months out of the
 last twenty-four months.
3. That I have not voted before at the taking of this poll.

Sworn before me at..... }
 in the Province of Alberta, the }
 day of....., 19 .. }

.....
Deputy Returning Officer.

No. 72.

THIRD SESSION
TENTH LEGISLATURE

10 GEORGE VI

1946

BILL

An Act to Provide Health Services
for the People of Alberta.

Received and read the

First time

Second time

Third time

HON. DR. CROSS.

EDMONTON:
A. Shnitka, King's Printer.
1946