

1969 Bill 60

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Second Session, 16th Legislature ~~18 Elizabeth II~~

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THE LEGISLATIVE ASSEMBLY OF ALBERTA

**BILL 60**

**An Act respecting the Alberta Health Care  
Insurance Plan**

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THE MINISTER OF HEALTH

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First Reading .....

Second Reading .....

Third Reading .....

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Printed by L. S. Wall, Queen's Printer, Edmonton

# BILL 60

1969

An Act respecting the Alberta Health Care  
Insurance Plan

(Assented to \_\_\_\_\_, 1969)

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

**1.** This Act may be cited as *The Alberta Health Care Insurance Act*.

**2.** In this Act,

- (a) “basic health services” means
  - (i) insured services,
  - (ii) those services that are rendered by a dental surgeon in the field of oral surgery and are specified in the regulations but are not within the definition of insured services,
  - (iii) optometric services, and
  - (iv) chiropractic services;
- (b) “benefits” means the amounts payable by the Commission in respect of the cost of basic health services or insured services, as the case requires;
- (c) “chiropractic services” means those services rendered by a chiropractor that are specified in the regulations as chiropractic services for the purposes of the Plan;
- (d) “chiropractor” means,
  - (i) with reference to services rendered in Alberta, a person registered as a member of the Alberta Chiropractic Association, and
  - (ii) with reference to services rendered in a place outside Alberta, a person lawfully entitled to practise chiropractic in that place;
- (e) “College” means the College of Physicians and Surgeons of the Province of Alberta;

## **Explanatory Notes**

**1.** This Bill will establish a health insurance plan for all residents of Alberta which will qualify for contributions from the Government of Canada under the Medical Care Act (Canada). The Bill will only come into force on proclamation but various parts of the Bill can be brought into force at different times. The main features of the Bill are as follows:

1. Part 1 establishes The Alberta Health Care Insurance Commission as a Crown corporation to operate the Plan.

2. Part 2 creates the Plan to provide universal coverage for "basic health services", that is, medical services and certain oral surgery and optometric services. Of these, medical services and some oral surgery procedures are "insured services" under the federal Act and are thus eligible for cost-sharing with the federal Government.

3. Part 3 provides for registration of residents for the purpose of facilitating payment of claims.

4. The new Plan will commence on a date to be fixed by the Lieutenant Governor in Council. On that date, the present "Alberta Health Plan" would cease to function except to deal with remaining claims.

**2.** Definitions.

- (f) "Commission" means The Alberta Health Care Insurance Commission incorporated by this Act;
- (g) "dental surgeon" means,
  - (i) with reference to services rendered in Alberta, a person registered as a member of The Alberta Dental Association, and
  - (ii) with reference to services rendered in a place outside Alberta, a person lawfully entitled to practise dental surgery in that place;
- (h) "dependants" means dependants as defined in the regulations;
- (i) "federal Act" means the *Medical Care Act* (Canada);
- (j) "insured services" means
  - (i) all services rendered by physicians that are medically required,
  - (ii) those services that are rendered by a dental surgeon in the field of oral surgery and are specified in the regulations and that are also deemed to be services rendered by a physician that are medically required under section 4, subsection (3) of the federal Act, and
  - (iii) any other services that are declared to be insured services pursuant to section 3, but does not include any services that a person is eligible for and entitled to under any Act of the Parliament of Canada or under *The Workmen's Compensation Act* or any law of any jurisdiction outside Alberta relating to workmen's compensation;
- (k) "Minister" means the Minister of Health;
- (l) "optometric services" means those services rendered by an optometrist that are specified in the regulations as optometric services for the purposes of the Plan;
- (m) "optometrist" means,
  - (i) with reference to services rendered in Alberta, a person registered as a member of The Alberta Optometric Association, and
  - (ii) with reference to services rendered in a place outside Alberta, a person lawfully entitled to practise optometry in that place;
- (n) "physician" means,
  - (i) with reference to medical services rendered in Alberta, a person registered as a medical



practitioner under *The Medical Profession Act*, and

- (ii) with reference to medical services rendered in a place outside Alberta, a person lawfully entitled to practise medicine in that place;
- (o) "Plan" or "Alberta Health Care Insurance Plan" means this Act and the regulations;
- (p) "plan commencement date" means July 1, 1969;
- (q) "resident" or "resident of Alberta" means a person lawfully entitled to be or to remain in Canada, who makes his home and is ordinarily present in Alberta but does not include
  - (i) a tourist, transient or visitor to Alberta, or
  - (ii) a member of the Canadian Forces, a member of the Royal Canadian Mounted Police Force or a person serving a term of imprisonment in a penitentiary as defined in the *Penitentiary Act* (Canada).

3. The Lieutenant Governor in Council may by regulation declare any basic health services referred to in section 2, clause (a), subclause (ii), (iii) or (iv) to be insured services for the purposes of the Plan.

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## PART 1

### THE ALBERTA HEALTH CARE INSURANCE COMMISSION

4. (1) There is hereby created a corporation with the name "The Alberta Health Care Insurance Commission" which shall consist of five members appointed by the Lieutenant Governor in Council, one of whom shall be designated as chairman and another as vice-chairman.

(2) The members of the Commission

- (a) shall be paid remuneration by the Commission for their services at the rates prescribed by the Lieutenant Governor in Council, and
- (b) shall be paid by the Commission their reasonable travelling and living expenses while absent from their ordinary place of residence and in the course of their duties as members of the Commission, in accordance with the by-laws of the Commission.

(3) The Commission shall hold meetings at least once a month.

**3.** Oral surgery and optometric services could be declared to be “insured services” if the federal Government were to eventually include them under the federal Act for cost-sharing.

**4.** The Alberta Health Care Insurance Commission.

(4) The Lieutenant Governor in Council

(a) shall appoint an executive director and assistant executive director of the Commission, and

(b) shall prescribe the salaries to be paid to them by the Commission in accordance with a schedule of salary rates established for that purpose.

(5) The assistant executive director is the acting executive director in the event of the absence or inability to act of the executive director or in the event that the office of executive director is vacant.

(6) The Commission may appoint one of its employees to be the acting executive director of the Commission in the event of the absence or inability to act of both the executive director and the assistant executive director or in the event that the offices of executive director and assistant executive director are both vacant.

**5.** (1) The Commission is for the purposes of this Act an agent of the Crown in right of Alberta and its powers under this Act may be exercised only as an agent of the Crown.

(2) An action or other legal proceeding in respect of any right or obligation acquired or incurred by the Commission on behalf of the Crown in right of Alberta, whether in its name or in the name of the Crown in right of Alberta, may be brought or taken by or against the Commission, in the name of the Commission, in any court that would have jurisdiction if the Commission were not an agent of the Crown.

**6.** (1) At a meeting of the Commission the vice-chairman shall preside at the meeting in the absence of the chairman and where the chairman and the vice-chairman are absent, the members present may elect one of their number to preside at that meeting.

(2) Three members of the Commission constitute a quorum at a meeting of the Commission.

(3) The affirmative votes of a majority of the members present at any meeting of the Commission at which a quorum is present are sufficient to pass any resolution or by-law to bind all the members.

(4) Where one or more vacancies occur on the Commission, the remaining members may exercise all the powers of the Commission so long as a quorum remains in office.



**5.** Commission is an agent of the Crown.

**6.** Meetings of Commission.

(5) At its meetings, the Commission may exercise any of its powers by resolution except where some other mode of exercising any power is prescribed in this Act.

**7. (1)** The head office of the Commission shall be at Edmonton.

(2) The Commission may establish such other offices and agencies elsewhere in the Province as it considers expedient.

**8.** The Commission may make by-laws respecting the calling of meetings of the Commission and the conduct of business thereat, the duties and conduct of members and generally as to the conduct of the business and affairs of the Commission.

**9. (1)** The Commission may appoint such officers and employees as it considers necessary and prescribe their duties and their salaries or remuneration.

(2) The appointment of officers and employees of the Commission shall be during pleasure unless otherwise agreed between the Commission and the officer or employee.

(3) The Commission may obtain the services of any agents or advisers or persons providing technical or professional services of a kind required by the Commission in connection with its business and affairs.

(4) The determination by the Commission of the salaries and remuneration payable to its employees shall be consistent with the position classification plan and salary ranges therefor established under *The Public Service Act, 1968*, except as otherwise provided by the Lieutenant Governor in Council.

**10.** The Commission is subject in respect of its accounts and financial transactions to audit by the Provincial Auditor once in each year and at such other times as the Lieutenant Governor in Council may direct.

**11. (1)** The Commission shall annually, after the end of its fiscal year, prepare a general report summarizing its transactions and affairs during its last fiscal year and showing its revenues and the application of its expenditures during that period, together with an audited balance sheet

**7. Offices.**

**8. By-laws.**

**9. Officers and employees.**

**10. Audit.**

**11. Annual report.**

of its accounts and financial transactions during that period and such other information as the Lieutenant Governor in Council may require.

(2) When the report is prepared, the Minister shall lay a copy of it before the Legislative Assembly if it is in session and if not, within 15 days after the commencement of the session in the next ensuing year.

**12.** The fiscal year of the Commission is the period from the first day of April to the next succeeding 31st day of March.

**13.** The members, officers and employees of the Commission and persons acting under the instructions of any of them or under the authority of this Act or the regulations are not personally liable for any loss or damage suffered by any person by reason of anything in good faith done or omitted to be done in the exercise or purported exercise of any powers given by this or any other Act or the regulations under any of them.

**14.** (1) The Provincial Treasurer shall from time to time pay to the Commission all moneys received from the Government of Canada as contributions to Alberta under the federal Act.

(2) The Lieutenant Governor in Council may from time to time direct the Provincial Treasurer to advance to the Commission from the General Revenue Fund any amounts required for the purpose of meeting the obligations of the Commission as they become due, and any order made under this subsection may prescribe the terms and conditions upon which any amounts so advanced are to be repaid by the Commission to the Provincial Treasurer and the rate of interest payable on those amounts by the Commission.

**15.** The Commission shall, before the first day of January in each year, prepare and present to the Minister its budget for the Commission's next ensuing fiscal year.

**16.** In addition to the powers vested in the Commission by section 14 of *The Interpretation Act, 1958* and by this Act, the Commission may

- (a) subject to the approval of the Lieutenant Governor in Council, acquire and hold any real property required for its purposes,
- (b) sell or otherwise dispose of any real property no longer required for its purposes,

**12.** Fiscal year.

**13.** No personal liability on members, employees, etc. of Commission.

**14.** Payment of federal contributions to the Commission. The Commission will also retain the premiums collected by it under the proposed Health Insurance Premiums Act: see Bill 69. The Provincial Treasurer may advance money to the Commission on a loan basis in the event that the Commission's two sources of revenue are at any time insufficient to meet its current obligations.

**15.** Annual budget.

**16.** Powers as to real property. Banking arrangements.

- (c) make such banking arrangements as are necessary for the carrying out of its duties and functions, and
- (d) draw, make, accept, endorse, execute and issue promissory notes, bills of exchange and other negotiable or transferable instruments.

**17.** The Commission may enter into such contracts or arrangements with any government or person as it considers necessary for its purposes, in addition to any other contracts that it is permitted to enter into under this Act.

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## **PART 2**

### **BASIC HEALTH CARE INSURANCE**

**18.** (1) The Commission shall, in accordance with this Act and the regulations, administer and operate on a non-profit basis a plan to provide benefits for basic health services to all residents of Alberta.

(2) The Commission is the public authority responsible for the administration and operation of the Alberta Health Care Insurance Plan.

**19.** (1) Subject to the provisions of this Act and the regulations, every resident of Alberta is entitled to the payment of benefits by the Commission in respect of basic health services rendered to him and his dependants on and after the plan commencement date.

(2) All claims for benefits are subject to assessment and approval by the Commission and the amount of the benefits to be paid to any claimant shall be determined solely by the Commission in accordance with this Act and the regulations.

**20.** (1) A person who ceases to be a resident of Alberta and becomes a resident of another province that is a participating province under the federal Act remains entitled to benefits for insured services rendered to him during the period of travel to that other province and the minimum period of residence or waiting period imposed by the medical care insurance plan of that other province, on the same basis as though he had not ceased to be a resident of Alberta.

(2) Subject to the regulations, a person who ceases to be a resident of Alberta and becomes a resident of a prov-

**17.** General power to contract..

**18.** Commission responsible for operation of the Plan.

**19.** Universal coverage of residents for insured services. Approval of claims by Commission.

**20.** Coverage of persons moving to another participating province during the waiting period in that province.

ince of Canada that is not a participating province under the federal Act remains entitled to benefits for insured services during the period (not exceeding three months) prescribed in respect of that province by the regulations.

(3) A resident does not cease to be entitled to benefits for insured services by reason of being temporarily absent from Alberta.

**21.** The Lieutenant Governor in Council may make regulations

- (a) authorizing or requiring the doing of any act or thing by the Minister, the Commission or any other person, or the expenditure by the Commission of any moneys, for the purpose of having the Plan meet the criteria prescribed under the federal Act or to enable the Government of Alberta to receive payment of contributions by the Government of Canada under the federal Act;
- (b) specifying the services rendered by dental surgeons in the field of oral surgery and the services rendered by optometrists and chiropractors that are basic health services for the purpose of the Plan;
- (c) prescribing the rates of benefits payable for basic health services other than physicians' services;
- (d) prescribing the manner in which benefits are to be paid and the information required to be submitted in connection with claims for benefits;
- (e) prescribing the waiting period (not exceeding three months) for a person who becomes a resident after the plan commencement date and in respect of which the costs of any basic health services rendered during that period to that person are not payable as benefits;
- (f) subject to section 19, subsection (2), providing for procedures for the review of any decision or the settlement of any question pertaining to the determination of
  - (i) the amount of benefits payable for a particular service, or
  - (ii) whether any service is a basic health service or not, or
  - (iii) whether any service rendered by a physician is medically required or not, or
  - (iv) any other matter that affects the entitlement to benefits;
- (g) providing, for the purpose of removing doubt, that any service is or is not a basic health service or an insured service or that any particular service that may be rendered by a physician is or is not medically required;



## **21. Regulations.**

- (h) prescribing the duration of periods for the purposes of section 20, subsection (2) and any conditions on which a person continues to be entitled to benefits by virtue of that subsection;
- (i) providing the circumstances under which a person is or is not to be considered as temporarily absent from Alberta for the purposes of section 20, subsection (3).

**22.** (1) The Commission may make by-laws prescribing the rates of benefits to be paid by the Commission for physicians' services.

(2) In making its initial by-laws under this section, the Commission shall have regard to

- (a) the schedule of fees published by the College then in effect, and
- (b) any agreement under subsection (3) then in effect.

(3) The Commission and the council of the College may enter into an agreement to provide for an index (in this section called the "agreed index") to be used for the purposes of this section, and such an agreement may provide for the use of any formulae, indices or factors for the purpose of determining the agreed index and any increase or decrease in the agreed index.

(4) The Commission and the council of the College shall at any time upon the request of either of them

- (a) review the then existing agreement pertaining to the agreed index and, if necessary, amend or replace the agreement, or
- (b) conduct a comparative review of the rates of benefits in the Commission's by-law and the current schedule of fees published by the College or any schedule of fees then under consideration by the council of the College.

(5) The Commission shall

- (a) review annually its current by-law under this section and in conducting that review shall have regard to the agreed index, and
- (b) amend or replace its by-law under subsection (1), if necessary, so that, in its estimation, the level of the rates of benefits is increased or decreased in proportion to the increase or decrease, as the case may be, of the agreed index.

(6) Subsection (5) does not preclude the Commission from amending or replacing its by-law under this section at any time other than annually, but in so amending or replacing its by-law, the Commission shall have regard to the latest comparative review conducted under subsection (4), clause (b).

**22.** The Commission establishes the rates of benefits for physicians' services but in doing so is guided by certain cost and income indices agreed upon by the medical profession and the current fee schedule of the profession. Both the indices and the fee schedule can be periodically reviewed for the purpose of aiding in adjustment of the rates of benefits.

**23.** The Commission may enter into agreements or arrangements for the payment of remuneration to physicians rendering medical services to residents on a basis other than fees for services rendered.

**24.** (1) Nothing in this Act or the regulations

- (a) interferes with the right of any person to his own choice of physician, dental surgeon, optometrist or chiropractor, or
- (b) interferes with the right of any physician, dental surgeon, optometrist or chiropractor to make any agreement or arrangement with any person with respect to the remuneration to be paid to him for services rendered by him, if the agreement or arrangement is made before the services are rendered, or
- (c) affects the right of any resident to receive any basic health services or benefits in respect thereof by reason of his choice of physician, dental surgeon, optometrist or chiropractor, or
- (d) interferes with the right of a physician, dental surgeon, optometrist or chiropractor to accept or refuse to accept a patient who is a resident, subject to humanitarian considerations and the traditions and ethics of the medical profession or the dental, optometric or chiropractic professions, as the case may be.

(2) Nothing in this Act or the regulations shall be construed to prevent any resident who does not desire to claim or receive benefits for basic health services provided to him or his dependants from assuming the responsibility for the payment of those costs.

**25.** (1) Every member and employee of the Commission and every other person employed in the administration of this Act shall preserve secrecy with respect to all matters that come to his knowledge in the course of his employment and which pertain to basic health services rendered and benefits paid therefor and shall not communicate any such matters to any other person except as otherwise provided in this section.

**23.** Special agreements with physicians.

**24.** (1) No interference with relationship between patient and the provider of service.

(2) No interference with the right of any person to pay for services without reference to the Plan.

**25.** Secrecy as to information in hands of Commission.

(2) A person referred to in subsection (1) may furnish information pertaining to the date on which basic health services were provided, the name and address of the person who provided the service, the benefits paid by the Commission for that service and the person to whom they were paid, but such information may be furnished only

- (a) in connection with the administration of this Act and the regulations or the federal Act, or
- (b) in proceedings under this Act or the regulations, or
- (c) to the person who provided that service, his solicitor or personal representative, the committee of his estate, his trustee in bankruptcy or other legal representative, or
- (d) to the person who received the services, his solicitor, personal representative or guardian, the committee or guardian of his estate or other legal representative of that person.

(3) Information in the hands of the Commission may be published by the Commission or the Government in statistical form if the individual names of persons are not thereby revealed or made identifiable.

(4) With the consent of the executive director of the Commission or a member or employee of the Commission authorized by him to do so, information of the kind referred to in subsection (2) and any other information pertaining to the nature of the basic health services provided and any diagnosis given by a person who provided the service may be disclosed or communicated to the professional association of which he is a member if an officer of that association makes a written request therefor and states that the information is required for the purposes of investigating a complaint against one of its members or for use in disciplinary proceedings involving that member.

(5) The executive director of the Commission may disclose to a professional association any information referred to in subsection (2) and any other information that pertains to basic health services rendered by a member of that association if he considers that it is in the interests of the public and of the professional association that the information be so disclosed.

(6) In subsections (4) and (5), "professional association" means

- (a) the council of the College or an investigating committee under *The Medical Profession Act*, or
- (b) the board of directors of The Alberta Dental Association or an investigating committee under *The Dental Association Act*, or



(c) the Council of Management of The Alberta Optometric Association or an investigating committee under *The Optometry Act, 1966*, or

(d) the council of the Alberta Chiropractic Association.

(7) A person who contravenes the provisions of this section is guilty of an offence.

(8) No report, form or return prescribed by or required for the purposes of this Act or the regulations shall be admitted in evidence in any judicial proceeding, other than a judicial proceeding under this Act, to adversely affect the interest of the person making the report, form or return.

**26.** No action lies against a person providing basic health services or a member of his staff in respect of information furnished to the Commission in respect of basic health services provided by him.

**27.** The right of any person to receive payment of benefits is not assignable and no sum owing by the Commission as benefits is liable to be charged or to be attached in any proceedings.

**28.** Where, as a result of the wrongful act or omission of another (in this section called the "wrong-doer"),

(a) a resident suffers personal injuries and receives basic health services as a consequence of those injuries, and

(b) the Commission has paid or is liable to pay benefits in respect of those services,

no person has any right or cause of action against the wrong-doer or any other person for the recovery of damages for the cost of those basic health services.

**29.** (1) In this section,

(a) "carrier" means a corporation, fraternal society or unincorporated group of persons that carries on a business of

(i) providing any prepaid basic health services, or

(ii) selling insurance in respect of the cost of any basic health services,

by way of group contracts or individual contracts or both;

(b) "insurer" means

(i) a carrier, or



**26.** No action against physician, etc. for providing information to the Commission.

**27.** Right to benefits is not assignable or liable to attachment.

**28.** No recovery of benefits from third parties.

**29.** Prohibition of insurance contracts and self-insurance after the plan commencement date where they duplicate the benefits provided by the Plan.

- (ii) an employer, corporation or unincorporated group of persons that administers a self-insurance plan;
- (c) "self-insurance plan" means a contract, plan or arrangement entered into, established, maintained in force or renewed under which coverage is provided
  - (i) by an employer for all or some of his employees who are residents of Alberta, or
  - (ii) by a corporation for all or some of its members who are residents of Alberta, or
  - (iii) by an unincorporated group of persons for all or some of its members who are residents of Alberta.
- (2) Effective on the plan commencement date, an insurer shall not enter into, issue or renew a contract or initiate or renew a self-insurance plan under which any resident or group of residents are provided with any pre-paid basic health services or indemnification for all or part of the cost of any basic health services.
- (3) Every insurer that contravenes subsection (2) is guilty of an offence.
- (4) Notwithstanding subsection (2), an insurer may enter into, issue or renew a contract or initiate or renew a self-insurance plan under which a resident is indemnified
  - (a) for the cost of any basic health service rendered outside Alberta that is over and above the benefits payable by the Commission for that service, or
  - (b) to the extent prescribed by the regulations and in those cases specified in the regulations, for the cost of any basic health services other than insured services over and above the benefits payable by the Commission for those services.

**30.** (1) A person providing insured services to a resident who wilfully makes a false statement in any report, form or return required to be submitted to the Commission to enable benefits to be paid by the Commission to him or to any other person is guilty of an offence and liable on summary conviction to a fine of not less than \$100 and not more than \$500.

(2) A person, other than a person providing insured services to a resident, who wilfully makes a false statement in any report, form or return prescribed by or required for the purposes of this Act or the regulations is guilty of an offence and liable on summary conviction to a fine of not less than \$100 and not more than \$500.

**31.** (1) Every person who renders basic health services but does not claim payment from the Commission of the benefits therefor shall, upon request, provide to any other person authorized by the regulations to make the claim all information required for the purpose of making the claim and obtaining payment from the Commission.

**30.** Offence re fraudulent claims, etc.

**31.** Provider of services is required to furnish sufficient information to permit a claimant to obtain payment of benefits.

(2) Every person who contravenes this section is guilty of an offence.

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### **PART 3**

#### **REGISTRATION**

**32.** The Lieutenant Governor in Council may make regulations

- (a) governing the registration of residents with the Commission generally,
- (b) prescribing the classes of dependants that a resident is required to register, and
- (c) prescribing the classes of persons exempted from registration.

**33.** (1) Every resident, other than a dependant or a person exempted by the regulations from doing so, shall register himself and his dependants with the Commission at such place and in such manner and form and at such times as may be prescribed by the regulations.

(2) Every resident who fails to comply with subsection (1) or who wilfully withholds information necessary for the purposes of registration or who wilfully gives false information to the person registering him is guilty of an offence and liable on summary conviction to a fine not exceeding \$100.

(3) Every person who is required under the regulations to accept registrations made under this Act shall discharge the duties imposed in respect of such registration by this Act or the regulations or by the Commission.

**34.** (1) Every person who produces to a person who renders basic health services or a member of his staff a certificate of registration issued under this Part

- (a) knowing that the person named therein is not, at the time of the production thereof, a resident of Alberta, or
- (b) knowing that the person on behalf of whom, and to facilitate whose treatment it is produced, is not the person named therein or a dependant of that person,

is guilty of an offence.

(2) In this section, "certificate of registration" means

- (a) a certificate of registration issued under this Part,
- or

**32.** Regulations.

**33.** Registration of residents.

**34.** Fraudulent use of certificate of registration.

- (b) any other document prescribed by the regulations as being a certificate of registration for the purposes of this Part.

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## **PART 4**

### **GENERAL**

**35.** The Lieutenant Governor in Council may make regulations

- (a) defining “dependant” for the purposes of the Plan;
- (b) providing for the establishment of committees for the purposes in connection with the Plan and prescribing their powers and duties;
- (c) prescribing the remuneration to be paid to committees appointed under clause (b) and the advisory committee appointed under section 36;
- (d) providing, as to any provision of the regulations, that its contravention is an offence;
- (e) conferring powers or duties on the Commission not otherwise given by this Act for the purpose of carrying out, administering and operating the Plan;
- (f) generally, providing for any other matter considered necessary for the purpose of administration and operation of this Act or to meet cases that may arise and for which no provision is made by this Act.

**36.** (1) The Lieutenant Governor in Council may appoint an advisory committee which shall meet at the call of the chairman at least once each year.

(2) The advisory committee

- (a) shall review the operation and administration of the Plan and report its recommendations in that regard to the Lieutenant Governor in Council, and
- (b) may consider and report on matters referred to it by the President of the Executive Council in regard to the Plan.

**37.** The Commission may prescribe such forms to be used under this Act or the regulations as it considers necessary in connection with its administration or the Commission may prescribe any other form that it considers applicable to any special case.

**35.** General regulations.

**36.** Advisory committee.

**37.** Forms.

**38.** The Commission may enter into agreements with any government, person or unincorporated group of persons

- (a) respecting any matter relating to the administration or operation of the Plan, or
- (b) providing for any matter for which no provision is made elsewhere in this Act or in the regulations which it considers necessary for the purpose of exercising or discharging its powers, duties or functions,

and the Commission may implement any agreement so made.

**39.** Subject to the approval of the Lieutenant Governor in Council, the Commission or the Minister or both may on behalf of the Government of Alberta enter into agreements with the Government of Canada respecting any matter that pertains to the operation or administration of the Alberta Health Care Insurance Plan or the federal Act.

**40.** Every person who is guilty of an offence under the regulations or under this Act and for which no penalty is specifically provided, is liable on summary conviction

- (a) for a first offence, to a fine of not more than \$500 and in default of payment to imprisonment for a term of not more than 30 days,
- (b) for a second offence, to a fine of not more than \$1,000 and in default of payment to imprisonment for a term of not more than 60 days, and
- (c) for a third or subsequent offence to imprisonment for a term of not more than six months without the option of a fine.

**41.** (1) The Lieutenant Governor in Council may establish a program to provide financial assistance in cases where because of sickness or disability a resident is faced with expenses that could not reasonably be foreseen and guarded against and that place an undue burden on the financial resources of the resident.

(2) The program may specify the types of expenses in respect of which assistance may be given and the portion of the expense that is to be borne by the resident.

**42.** (1) Upon the plan commencement date, a resident who is entitled to benefits under this Act is also entitled to receive, without charge, insured services that are provided under

- (a) *The Cancer Treatment and Prevention Act, 1967*, or



**38.** Special agreements by Commission.

**39.** Agreements with Canada.

**40.** General penalties for offences.

**41.** Program of financial assistance.

**42.** Many Acts deal with provision of insured services (usually physicians' services) in particular fields, e.g., tuberculosis, poliomyelitis, etc. but have various residence requirements. The object of this section is to make the residence requirements of this Bill apply to all the Acts enumerated in subsection (1) so that residence requirements will be uniform in relation to all insured services, regardless of whether they are provided by private practitioners or under public programs.

- (b) *The Health Unit Act*, or
- (c) *The Mental Health Act*, or
- (d) *The Poliomyelitis Sufferers Act*, or
- (e) *The Public Health Act*, or
- (f) *The Tuberculosis Act*, or
- (g) *The Venereal Diseases Prevention Act, 1965*, or
- (h) any other Act under which the Minister is empowered to provide any insured services or the whole or part of the cost of any insured services,

notwithstanding any provision of those Acts or the regulations thereunder that provide requirements as to residence in Alberta that are inconsistent with or more onerous than the requirements as to residence under the Plan.

(2) Subsection (1) does not affect any provision in any Act referred to in that subsection or in any regulations thereunder that pertain to requirements as to residence in Alberta in relation to the provision of any services that are not insured services.

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## PART 5

### TRANSITIONAL AND CONSEQUENTIAL

**43.** (1) *The Public Service Act, 1968* is amended as to section 3, subsection (4) by adding the word "or" at the end of clause (e) and by adding the following clause:

(f) The Alberta Health Care Insurance Commission.

(2) *The Public Service Pension Act* is amended as to section 34, clause (a) by striking out the word "and" at the end of subclause (iii), by adding the word "and" at the end of subclause (iv) and by adding the following subclause:

(v) The Alberta Health Care Insurance Commission,

(3) *The Alberta Government Purchasing Agency Act* is amended as to section 8, subsection (2) by adding after the words "Workmen's Compensation Board" the words "The Alberta Health Care Insurance Commission".

**44.** Effective on the plan commencement date, *The Treatment Services Act* is amended as to section 2 by striking out clause (c) and by substituting the following:

(c) "treatment services" means services, supplies, appliances and things rendered or furnished for the purpose of or in connection with diagnosis, treat-

**43.** (1) The Statutes of Alberta, 1968, chapter 81 is amended to exclude members and employees of the Commission from the application of The Public Service Act, 1968.

(2) The Revised Statutes of Alberta, 1955, chapter 264 is amended to permit the Lieutenant Governor in Council to order that The Public Service Pension Act is to apply to members and employees of the Commission.

(3) Chapter 271 of the Revised Statutes is amended to permit the Alberta Government Purchasing Agency to act as the purchasing agent of the Commission.

**44.** The Revised Statutes of Alberta, 1955, chapter 146 is amended to exclude basic health services from the definition of "treatment services" since there will be no further need to provide basic health services under The Treatment Services Act.

ment or care but does not include any basic health services as defined in *The Alberta Health Care Insurance Act*.

**45.** (1) Subject to subsection (2), *The Alberta Health Plan Act* is repealed, effective on the plan commencement date.

(2) *The Alberta Health Plan Act* shall be deemed to remain unrepealed for the purpose only of

- (a) dealing with and paying claims for benefits under standard contracts in respect of insured services provided under that Act before the plan commencement date, and
- (b) concluding any outstanding matters under that Act and the regulations or in connection with the administration of the Alberta Health Plan Division of the Department of Health.

(3) Unless a claim for benefits in respect of insured services under standard contracts provided before the plan commencement date under *The Alberta Health Plan Act* is filed in accordance with the regulations thereunder within the period of six months after the plan commencement date, the right to payment of those benefits by the Commission is extinguished and barred.

(4) Upon the date that Part 1 of this Act comes into force,

- (a) the employees of the Alberta Health Plan Division of the Department of Health become the employees of the Commission, and
- (b) all personal property of the Government used or assigned for the use of the said Division becomes the property of the Commission, and any dispute arising as to whether any particular property has passed to the Commission under this clause shall be determined by the Treasury Board.

(5) In the event that Part 1 of this Act is proclaimed in force before the plan commencement date,

- (a) *The Alberta Health Plan Act* is amended
  - (i) as to section 2, by adding the following after clause (d):
    - (e) "Commission" means The Alberta Health Care Insurance Commission;
  - (ii) by striking out the word "Minister" wherever it occurs and by substituting the word "Commission",
- (b) a reference to the Minister in any regulation, order, contract or document made or entered into under *The Alberta Health Plan Act* shall be deemed to be a reference to the Commission.

**45.** The Statutes of Alberta, 1967, chapter 28 is repealed effective on the plan commencement date subject to concluding matters re claims, etc. When the Commission comes into existence it will assume the functions of the Minister under the present Act.

**46.** (1) This Act, except section 1, section 45 and this section, comes into force on a date or dates to be fixed by Proclamation.

(2) Section 1, section 45 and this section come into force on the day upon which this Act is assented to.

