

HOSPITAL INSURANCE ACT**1.** In this Act:

- (a) “Minister” means the Minister of Health and Social Services;
- (b) “regulation” means a regulation made under this Act;
- (c) “insured services” means hospital services defined as such by regulation;
- (d) “hospital centre” means a hospital centre within the meaning of the Act respecting health services and social services ([chapter S-4.2](#)) or within the meaning of the Act respecting health services and social services for Cree Native persons ([chapter S-5](#));
- (e) “residential and long-term care centre” means a residential and long-term care centre within the meaning of the Act respecting health services and social services;
- (f) “institution” means a public or private institution under agreement governed by the Act respecting health services and social services or a public or private institution under agreement governed by the Act respecting health services and social services for Cree Native persons;
- (g) “Board” means the Régie de l’assurance maladie du Québec established under the Act respecting the Régie de l’assurance maladie du Québec ([chapter R-5](#));
- (h) “agency” means a health and social services agency referred to in the Act respecting health services and social services.

R. S. 1964, c. 163, s. 1; 1970, c. 42, s. 17; 1979, c. 1, s. 54; 1985, c. 23, s. 24; 1992, c. 21, s. 91; 1994, c. 23, s. 23; 1999, c. 89, s. 53; 2005, c. 32, s. 308.

2. In order that the residents of Québec and such other persons as are determined by regulation receive, without charge, insured services upon uniform terms and conditions, the Minister shall assign to the institutions referred to in the Act respecting health services and social services for Cree Native persons ([chapter S-5](#)) which operate a hospital centre and to the institution to which Part IV.2 of the Act respecting health services and social services ([chapter S-4.2](#)) applies the amounts needed to finance the cost of the insured services they dispense, and shall ensure that each agency does likewise with regard to those institutions of its region which operate a hospital centre and those which operate a residential and long-term care centre that are determined by the Minister.

Insured services dispensed by the institutions referred to in the first paragraph shall be financed in accordance with the provisions of the Act respecting health services and social services for Cree Native persons or the Act respecting health services and social services, as the case may be.

R. S. 1964, c. 163, s. 2; 1971, c. 48, s. 161; 1992, c. 21, s. 92; 1994, c. 23, s. 23; 1998, c. 39, s. 176; 2005, c. 32, s. 308.

2.1. An institution referred to in section 2 may request that a person present, as proof of that person’s admissibility to receive insured services free of charge pursuant to this Act, the health insurance card or eligibility card issued to him by the Board in accordance with section 9 or 9.0.1 of the Health Insurance Act ([chapter A-29](#)).

1992, c. 21, s. 93; 1999, c. 89, s. 53.

3. The Minister may, with the approval of the Conseil du trésor, enter into any agreement for the purposes of the application of this Act with any body representing a class of

professionals in the field of health within the meaning of the Health Insurance Act ([chapter A-29](#)). Such an agreement may be entered into with any body representing clinical biochemists or medical physicists.

An agreement is binding on all the pharmacists, clinical biochemists or medical physicists practising in a hospital centre operated by an institution governed by the Act respecting health services and social services for Cree Native persons ([chapter S-5](#)) and who are members of the body that has entered into the agreement and all the pharmacists, clinical biochemists or medical physicists whose scope of professional activity is the same as that of such members and who are contemplated by the agreement.

Any agreement or part of an agreement, if it expressly so provides, may bind any institution. However, the Minister must consult the institutions or groups of institutions susceptible to being bound by an agreement or part of an agreement and they may submit recommendations to the Minister regarding the terms and conditions of their participation in the making of such agreement or part of an agreement.

1974, c. 40, s. 25; 1984, c. 27, s. 40; 1992, c. 21, s. 94, s. 375; 1994, c. 23, s. 23; 2000, c. 8, s. 241; 2003, c. 25, s. 52.

4. (*Repealed*).

R. S. 1964, c. 163, s. 3; 1971, c. 48, s. 160, s. 161; 1992, c. 21, s. 95.

5. (*Repealed*).

R. S. 1964, c. 163, s. 4; 1971, c. 48, s. 161; 1979, c. 1, s. 55.

6. The Minister, with the approval of the Government, may enter into an agreement with the Minister of Health of Canada to provide for the payment by Canada to Québec of contributions to the cost of insured services furnished at the expense of Québec pursuant to this Act.

Such agreement shall provide for payment by Québec for insured services furnished to its residents who are eligible therefore by hospitals of the Government of Canada or of other provinces.

R. S. 1964, c. 163, s. 5; S.C. 1996, c. 8, s. 32.

7. The sums due under the agreements provided for by this Act shall be payable out of the moneys appropriated by Parliament for such purposes.

R. S. 1964, c. 163, s. 6; 1992, c. 21, s. 96.

8. The Government, by regulation in conformity with the foregoing provisions, may:

(a) establish the plan for the carrying out of this Act;

(b) define residents of Québec, the insured services to be furnished to them and the other insured persons;

(c) (*paragraph repealed*);

(d) rule upon any other matter requisite for the carrying out of this Act or of an agreement.

R. S. 1964, c. 163, s. 7; 1971, c. 48, s. 161; 1992, c. 21, s. 97.

9. Every regulation shall come into force upon its publication in the *Gazette officielle du Québec* or on such date, not earlier than such publication, as is fixed in the regulation.

R. S. 1964, c. 163, s. 8.

10. (1) The State shall be subrogated in the right of recovery of any insured person against any third party to the extent of the cost of all insured services furnished or to be furnished in respect of injury caused by the fault of such third party. Any claim by the State must be notified by the Board to the third party by way of a notice stating the amount of the debt and the reasons for which the debt is due.

(2) In case of contributory negligence the amount of such subrogation shall be subject to reduction in the same proportion as the insured person's right of recovery.

(3) The Minister shall have authority to compromise any claim of the State under this section and may delegate such authority.

(3.1) An insurer of a third party's liability shall notify the Board in writing as soon as the insurer is informed of an event involving physical or mental injury that entails or might entail the payment of insured services.

(4) An insurer of a third party's liability shall not discharge his obligation to indemnify the latter of his liability to the State under this section otherwise than by payment to the State.

(5) An undertaking by an insured person to discharge a third party's or an insurer's liability to the State under this section or to save them harmless from such liability shall be invalid and be deemed unwritten in any agreement, transaction or release.

(6) The rights acquired by the effect of a subrogation under this section belong to the domain of the State from the day they arise and are subject to the rules applicable to rights belonging to the domain of the State; however, any resulting right of action is prescribed three years after the date on which the State became aware of the fact giving rise to it.

(7) An institution shall, on a request by the Board specifying the nature of the information or documents sought, communicate to the Minister any information or document contained in the insured person's record that is necessary to exercise a right of recovery under subsection 1, provided the institution has informed the insured person of the nature of the information or documents to be communicated to the Board within a reasonable time before they are sent.

(8) For the purposes of this section, "insurer of a third party's liability" also means a person or group of persons that provides coverage which may otherwise be obtained under a liability insurance contract.

R. S. 1964, c. 163, s. 9; 1989, c. 50, s. 42; 1999, c. 40, s. 28; 2006, c. 43, s. 40; 2016, c. 28, s. 38.

11. No insurer may enter into or maintain an insurance contract that includes coverage for the cost of an insured service furnished to a resident.

No person may establish or maintain an employee benefit plan that includes coverage for the cost of an insured service furnished to a resident.

An insurance contract or employee benefit plan inconsistent with the first or the second paragraph, as the case may be, that also covers other goods and services remains valid as regards those other goods and services, and the consideration provided for the contract must be adjusted accordingly unless the beneficiary of the goods and services agrees to receive equivalent benefits in exchange.

Nothing in this section prevents an insurance contract or an employee benefit plan that covers the excess cost of insured services rendered outside Québec from being entered into or established.

“Insurer” means a legal person holding a licence issued by the Autorité des marchés financiers that authorizes it to transact insurance of persons in Québec.

“Employee benefit plan” means a funded or unfunded uninsured employee benefit plan that provides coverage which may otherwise be obtained under a contract of insurance of persons.

An insurer or a person administering an employee benefit plan that contravenes the first or second paragraph is guilty of an offence and is liable to a fine of \$50,000 to \$100,000 and, for a subsequent offence, to a fine of \$100,000 to \$200,000.

R. S. 1964, c. 163, s. 10; 1971, c. 48, s. 161; 1992, c. 21, s. 98; 2006, c. 43, s. 41.

12. The Minister and the officers and employees charged with the carrying out of this Act shall not reveal, except to the extent prescribed by an agreement made under section 6, any information obtained in the carrying out of this Act and they cannot be compelled to do so before any court of civil jurisdiction.

They shall not be personally responsible for anything done in good faith in the performance of their duties.

R. S. 1964, c. 163, s. 11.

13. No person shall knowingly obtain or receive the benefit of insured services that he is not entitled to obtain or receive under this Act and the regulations.

No person shall knowingly aid or abet another person to obtain or receive insured services that such other person is not entitled to obtain or receive under this Act and the regulations.

Every person who contravenes a provision of this section is guilty of an offence and is liable to a fine not exceeding \$500.

R. S. 1964, c. 163, s. 12; 1990, c. 4, s. 73.

14. Every person who obstructs an inspector or a medical practitioner in the performance of his duties under this Act and the regulations is guilty of an offence and is liable to a fine \$50 to \$500.

R. S. 1964, c. 163, s. 13; 1990, c. 4, s. 74.

15. Every person who contravenes any provision of this Act or the regulations for the violation of which no penalty is specifically provided is guilty of an offence and is liable to a fine of not more than \$100.

R. S. 1964, c. 163, s. 14; 1990, c. 4, s. 75.

16. *(This section ceased to have effect on 17 April 1987).*

1982, c. 21, s. 1; U. K., 1982, c. 11, Sch. B, Part I, s. 33.

REPEAL SCHEDULE

In accordance with section 17 of the Act respecting the consolidation of the statutes (chapter R-3), chapter 163 of the Revised Statutes, 1964, in force on 31 December 1977, is repealed effective from the coming into force of chapter A-28 of the Revised Statutes.