
SUBORDINATE LEGISLATION FILED UNDER THE STATUTES AND SUBORDINATE LEGISLATION ACT
CONSOLIDATION OF NEWFOUNDLAND REGULATIONS

CONSOLIDATED NEWFOUNDLAND REGULATION 20/96

Medical Care Insurance Beneficiaries and Inquiries Regulations
under the
Medical Care Insurance Act
(O.C. 96-132)

Under the authority of section 44 of the *Medical Care Insurance Act* and the *Subordinate Legislation Revision and Consolidation Act*, the Lieutenant-Governor in Council makes the following regulations.

REGULATIONS

Analysis

Section:

1. Short title
2. Definitions
3. Beneficiaries of insured services
4. Persons entering the province

Section:

5. Residency ceasing
6. Inquiry
7. Abuse of benefits
8. Repeal

Short title

1. These regulations may be cited as the *Medical Care Insurance Beneficiaries and Inquiries Regulations*.

331/78 s1

Definitions

2. In these regulations:

(a) "Act" means the Medical Care Insurance Act;

(b) "insured services" has the meaning assigned to that term by the *Medical Care Insurance Insured Service Regulations*; and

	<p>(c) “participating province” means a province of Canada which, by virtue of legislation of that province, participates in a medical care insurance plan for which a contribution is payable by Canada under the <i>Medical Care Act</i> (Canada).</p> <p style="text-align: right;">331/78 s2</p>
Beneficiaries of insured services	<p>3. A person shall be a beneficiary for the purposes of the Act and the regulations and is entitled to insured services provided that person</p> <p>(a) is a resident;</p> <p>(b) has duly completed an application for registration; and</p> <p>(c) has received proof of eligibility as a beneficiary from the commission and has presented same to a physician rendering insured services.</p> <p style="text-align: right;">331/78 s3</p>
Persons entering the province	<p>4. (1) A person who enters the province from a participating province shall be a beneficiary for the purposes of the Act and the regulations and is entitled to insured services from a date commencing on the first day of the third month following the month of arrival in the province.</p> <p>(2) A person who enters the province from other than a participating province shall be a beneficiary for the purposes of the Act and the regulations and is entitled to insured services from the date of arrival in the province.</p> <p>(3) Notwithstanding the above, subsections (1) and (2) shall apply only if the person entering the province become a resident.</p> <p style="text-align: right;">331/78 s4</p>
Residency ceasing	<p>5. A person who ceases to be a resident but who remains in Canada shall be considered to be a beneficiary for the purposes of the Act and the regulations and is entitled to insured services for a period up to the last day of the second month following the month of arrival in the participating province.</p> <p style="text-align: right;">331/78 s5</p>
Inquiry	<p>6. (1) Where the minister considers it advisable, he or she may cause an inquiry to be held on any matter arising from the Act or the regulations.</p>

(2) In order to carry out an inquiry, the minister may appoint a person to hold an inquiry and to report to the minister on it and that person shall be considered to be and shall have all the powers of a commissioner appointed under the *Public Enquiries Act*.

331/78 s6

Abuse of benefits

7. (1) If the commission is satisfied that a beneficiary is making substantial unnecessary use of insured services and is abusing medical care insurance, it may assess the beneficiary for his or her unnecessary use of insured services and may demand payment of the assessment.

(2) In a court of competent jurisdiction, the commission may recover a demand for payment made under subsection (1) as a debt due to the commission.

(3) Before an assessment is made by the commission under subsection (1), it shall provide the beneficiary with an opportunity to be heard by a subcommittee of the commission consisting of not less than 3 commission members, at least one of whom shall be a physician, as to the allegation that the beneficiary is making substantial unnecessary use of insured services and is abusing medical care insurance.

(4) A beneficiary dissatisfied with the assessment made by the commission may appeal it to a judge of the Trial Division within 30 days of the assessment.

331/78 s7

Repeal

8. The Newfoundland Medical Care Insurance (Beneficiaries and Enquiries) Regulations, 1973, Newfoundland Regulation 331/78, are repealed.