

PART II

REVISED REGULATIONS OF SASKATCHEWAN

CHAPTER N-4.02 REG 1

The NewGrade Energy Inc. Protection Act

Section 17

Order in Council 685/94, dated October 21, 1994

(Filed October 21, 1994)

Title

1 These regulations may be cited as *The NewGrade Energy Inc. Protection (Repeal) Regulations*.

S.S. 1993, c.N-4.02 repealed

2 *The NewGrade Energy Inc. Protection Act* is repealed.

Coming into force

3 These regulations come into force on the day on which they are filed with the Registrar of Regulations.

CHAPTER S-29 REG 19

The Saskatchewan Medical Care Insurance Act

Sections 40 and 48

Order in Council 710/94, dated October 25, 1994

(Filed October 26, 1994)

Title

1 These regulations may be cited as *The Saskatchewan Medical Care Insurance Payment Regulations, 1994*.

Interpretation

2 In these regulations:

- (a) “**account**” means an account for payment containing the information required to enable the minister to make payment pursuant to the Act with respect to an insured service;
- (b) “**Act**” means *The Saskatchewan Medical Care Insurance Act*;
- (c) “**registry number**” means a unique number for the purpose of identifying a physician, chiropractor, optometrist or dentist that is known to the physician, chiropractor, optometrist or dentist and is kept on the files of the department for that purpose.

Definitions for sections 5 and 6

3 For the purposes of sections 5 and 6, with respect to services provided in Saskatchewan:

- (a) “**chiropractor payment schedule**” means, for services provided in the period commencing on September 8, 1992, the schedule adopted by the Medical Care Insurance Branch of the department for payment of chiropractor services and entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by a Chiropractor, September 8, 1992”, as amended by the Saskatchewan Health Chiropractor’s Newsletter number 2, dated November 25, 1992;

- (b) **“dentist payment schedule”** means:
- (i) for services provided in the period commencing on August 1, 1993 and ending on July 31, 1994, the schedule adopted by the Medical Care Insurance Branch of the department for payment of dentist services entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by a Dentist, August 1, 1993”; and
 - (ii) for services provided in the period commencing on August 1, 1994, the schedule adopted by the Medical Care Insurance Branch of the department for payment of dentist services entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by a Dentist, August 1, 1994”;
- (c) **“optometrist payment schedule”** means:
- (i) for services provided in the period commencing on June 1, 1992 and ending on March 31, 1994, the schedule adopted by the Medical Care Insurance Branch of the department for payment of optometrist services and entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by an Optometrist, June 1, 1992”; and
 - (ii) for services provided in the period commencing on April 1, 1994, the schedule adopted by the Medical Care Insurance Branch of the department for payment of optometrist services and entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by an Optometrist, April 1, 1994”;
- (d) **“physician payment schedule”** means, for services provided in the period commencing on August 1, 1993, the schedule adopted by the Medical Care Insurance Branch of the department for payment of physician services and entitled “Medical Care Insurance Branch Payment Schedule for Insured Services Provided by a Physician, August 1, 1993”, as amended by:
- (i) the Saskatchewan Health Physician’s Newsletter number 9, dated April 1, 1994; and
 - (ii) the Saskatchewan Health Physician’s Newsletter number 10, dated November 1, 1994.

Definitions for sections 7 and 8

4(1) For the purposes of sections 7 and 8, with respect to services provided outside Saskatchewan, and subject to subsection (2):

- (a) **“chiropractor payment schedule”** means chiropractor payment schedule as defined in clause 3(a);
- (b) **“dentist payment schedule”** means dentist payment schedule as defined in clause 3(b);
- (c) **“optometrist payment schedule”** means optometrist payment schedule as defined in clause 3(c);
- (d) **“physician payment schedule”** means physician payment schedule as defined in clause 3(d).

(2) For the purposes of this section, with respect to the dentist payment schedule, the schedule entitled "Medical Care Insurance Branch Payment Schedule for Insured Services Provided by a Dentist, August 1, 1993" became effective on the day on which *The Medical Care Insurance Payment Amendment Regulations, 1993 (No. 2)* were filed with the Registrar of Regulations, and applies to services provided on and from that day, notwithstanding anything contained in that schedule.

Account to be presented to minister

5(1) The minister may make payment to a person for insured services provided to a beneficiary where the person presents an account to the minister containing:

- (a) the full name of the patient;
- (b) the registration number of the patient;
- (c) the month and year of birth and the sex of the patient;
- (d) the location of services as follows:
 - (i) office;
 - (ii) hospital, in-patient;
 - (iii) hospital, out-patient;
 - (iv) home; or
 - (v) other;
- (e) the diagnosis or a diagnostic code prescribed by the minister;
- (f) where the service is provided in Saskatchewan, the code in the physician payment schedule, chiropractor payment schedule, dentist payment schedule or optometrist payment schedule corresponding to the procedure or treatment performed;
- (g) where the service is provided outside Saskatchewan, the description of the procedure or treatment performed;
- (h) with respect to:
 - (i) hospital care, the dates of the first and last visits and the total number of visits;
 - (ii) any service other than a hospital visit, the date of each service;
- (i) the amount charged for each service provided;
- (j) where the nature of the service is unusual, additional remarks;
- (k) the name and signature of the person providing service; and
- (l) where applicable, the name or registry number of the referring practitioner.

(2) Accounts for insured services provided on or after April 1, 1994 by a physician practising in Saskatchewan are to be presented to the minister by telecommunication for payment, unless the minister otherwise authorizes.

(3) Notwithstanding clause (1)(k), where the minister has entered into an agreement with any practitioner to accept accounts in an electronic recording medium, an account is not required to contain the signature of the person providing service.

Services within Saskatchewan

6(1) Where an insured service is provided in Saskatchewan to a beneficiary by:

(a) a chiropractor, the minister shall make payment for that service in accordance with the chiropractor payment schedule and the assessment rules contained in that schedule;

(b) a dentist, the minister shall make payment for that service in accordance with the dentist payment schedule and the assessment rules contained in that schedule;

(c) an optometrist, the minister shall make payment for that service in accordance with the optometrist payment schedule and the assessment rules contained in that schedule;

(d) a physician, the minister shall make payment for that service in accordance with the physician payment schedule and the assessment rules contained in that schedule.

(2) Where a beneficiary has been referred to a specialist for an insured service by any one of the persons listed in subsection (3), the provisions of these regulations apply as if the beneficiary had been referred to that specialist by another physician.

(3) For the purposes of subsection (2), the list of persons is:

(a) an optometrist;

(b) a dentist, where the specialist confines his or her practice to the field of:

(i) orthopaedic surgery;

(ii) plastic surgery;

(iii) otolaryngology;

(iv) the combined fields of ophthalmology and otolaryngology;

(v) neurology;

(vi) neurosurgery; or

(vii) dermatology;

(c) a chiropractor.

Payment for insured services

7(1) The minister shall make payment for a service that is described in subsection 14(3) of the Act, where the service would have been an insured service if provided in Saskatchewan by a chiropractor, in accordance with the chiropractor payment schedule and the assessment rules contained in that schedule.

(2) The minister shall make payment for a service that is described in subsection 14(3) of the Act, where the service would have been an insured service if provided in Saskatchewan by a dentist, in accordance with the dentist payment schedule and the assessment rules contained in that schedule.

(3) The minister shall make payment for a service that is described in subsection 14(3) of the Act, where the service would have been an insured service if provided in Saskatchewan by an optometrist, in accordance with the optometrist payment schedule and the assessment rules contained in that schedule.

(4) Subject to sections 9 and 10, the minister shall make payment for a service that is described in subsection 14(3) of the Act, where the service would have been an insured service if provided in Saskatchewan by a physician, in accordance with the physician payment schedule and the assessment rules contained in that schedule.

Exception

8 The minister shall make payment for a service described in subsection 14(3.1) of the Act in accordance with the physician payment schedule and the assessment rules contained in that schedule.

Services not available in Saskatchewan

9(1) For the purposes of this section and section 10, “**medical care insurance plan**” means the health care insurance plan of a province within the meaning of the *Canada Health Act*.

(2) Notwithstanding the other provisions of these regulations, the minister may make payment in accordance with subsection (3) with respect to a service that is an insured service pursuant to subsection 14(3) of the Act where:

(a) a specialist in Saskatchewan in the field of practice in which the insured service falls notifies the minister in writing:

(i) that the beneficiary is in need of the insured service;

(ii) that the insured service is not available in Saskatchewan; and

(iii) whether or not, to the specialist’s knowledge, the insured service is available in any other province of Canada; and

(b) the case is reviewed by the minister and the minister, on consideration of the availability of the insured service and the nature of the insured service to be provided, is of the opinion that payment ought to be made pursuant to this section.

(3) Where the minister is of the opinion pursuant to clause (2)(b) that the payment ought to be made with respect to a service that is an insured service pursuant to subsection 14(3) of the Act, the minister may make the payment:

(a) where the insured service is available and is to be provided in a province of Canada other than Saskatchewan, at the same rate as that paid by the medical care insurance plan of that province for a service of the kind provided;

- (b) where, in the opinion of the minister, the insured service is available in a province of Canada other than Saskatchewan but is to be provided outside Canada, at the same rate as if the insured service had been provided in Saskatchewan;
 - (c) where, in the opinion of the minister, the insured service is not available in Canada and the insured service is to be provided outside Canada, at a rate that the minister considers to be fair and reasonable after taking into account the locality in which the insured service is being provided.
- (4) If the minister makes a payment with respect to a service pursuant to subsection (3), the minister may also make a payment, on the same basis as the payment made pursuant to subsection (3), for another service provided to the same beneficiary where the service:
- (a) is an insured service pursuant to subsection 14(3) of the Act; and
 - (b) is ancillary to and is provided in conjunction with the service for which payment was made pursuant to subsection (3).
- (5) Where payment is to be made pursuant to clause (3)(b) or (c), the minister shall calculate the amount payable in Canadian funds based on the exchange rate prevailing on the day that the account for payment is received by the minister.

Agreements with other provinces

10 The minister may make payment for a service in accordance with the payment schedule of the medical care insurance plan of a province of Canada where:

- (a) the minister has entered into an agreement with that province providing for payment in accordance with this section;
- (b) the service is provided in that province; and
- (c) the service:
 - (i) is an insured service pursuant to subsection 14(3) of the Act;
 - (ii) is an insured service in that province; and
 - (iii) is not excluded by the agreement mentioned in clause (a).

Application of subsection 16(1) of Act

11(1) Subject to subsection (2), the period of six consecutive months immediately following the provision of the insured service is specified as the period for the purpose of subsection 16(1) of the Act.

(2) Where the minister is of the opinion that the minister did not receive an account within the period specified in subsection (1) due to factors beyond the control of the person presenting the account, that period is increased to 12 consecutive months immediately following the provision of the insured service.

(3) For the purposes of subsection (2), the following factors are deemed not to be factors beyond the control of the person presenting the account:

- (a) neglect;
- (b) loss of the account;
- (c) failure to obtain the account from the person providing the service.

Board defined

12 In sections 13 to 24, “**board**” means the medical assessment board, the dental assessment board or the optometric assessment board, as the case may be.

Appeal boards continued

13(1) The medical assessment board established pursuant to *The Medical Care Insurance Payment Regulations* is continued and consists of at least three and not more than five physicians appointed by the board of directors of the Saskatchewan Medical Association, one of whom is to be designated as the chairperson.

(2) The dental assessment board established pursuant to *The Medical Care Insurance Payment Regulations* is continued and consists of at least three and not more than five dentists appointed by the council of the College of Dental Surgeons of Saskatchewan, one of whom is to be designated as the chairperson.

(3) The optometric assessment board established pursuant to *The Medical Care Insurance Payment Regulations* is continued and consists of at least two and not more than four optometrists appointed by the council of the Saskatchewan Association of Optometrists and one ophthalmologist appointed by the council of the College of Physicians and Surgeons of Saskatchewan, one of whom is to be designated by the council of the Saskatchewan Association of Optometrists as the chairperson.

Term of appointment of members

14(1) Each member appointed to a board pursuant to section 13 holds office for a term of not more than three years and after that time until the member is reappointed or a successor is appointed.

(2) No member of a board is to hold office for more than two consecutive terms.

Only residents may be members

15(1) A person who is not a resident of Saskatchewan is not eligible for appointment to a board.

(2) Where a person who is a member of a board ceases to be a resident of Saskatchewan, his or her appointment automatically terminates.

Quorum

16(1) Where a board consists of an even number of members, 50% of the members constitutes a quorum.

(2) Where a board consists of an odd number of members, a majority of the members constitutes a quorum.

When question lost

17 Where a board sits with an even number of members and 50% or less of the members vote for a matter or question before the board, the matter or question is lost.

Termination of membership

18 Where a member of a board is unable for any reason to perform his or her duties as a member, the person who appointed the member may terminate the person’s membership on the board.

Remuneration of members

19(1) The minister shall pay members of a board remuneration for attending to the affairs of the board at the rate of:

- (a) \$155 per day for the chairperson; and
- (b) \$110 per day for the other members.

(2) The minister shall pay members of a board for travel and other expenses incurred by the member in connection with board business in accordance with the tariff of travel and sustenance expenses approved pursuant to *The Public Service Act* for employees in the public service.

Department to be notified

20 A person who appoints a member to a board shall notify the department of the appointment, resignation or termination of each member appointed by that person.

Appeal may be made

21 Where a physician, dentist or optometrist is dissatisfied with the minister's assessment of an account for an insured service provided by him or her to a beneficiary, he or she may appeal from the minister's assessment to:

- (a) in the case of a physician, the medical assessment board;
- (b) in the case of a dentist, the dental assessment board;
- (c) in the case of an optometrist, the optometric assessment board.

Powers of board

22 On hearing an appeal pursuant to section 21, a board may:

- (a) confirm the decision of the minister;
- (b) vary the decision of the minister; or
- (c) substitute its own decision for the minister's decision.

Boards may review

23(1) The dental assessment board may review from time to time and make recommendations respecting the method of assessment of accounts for payment for insured services provided to beneficiaries by dentists.

(2) The optometric assessment board may review from time to time and make recommendations respecting the method of assessment of accounts for payment for insured services provided to beneficiaries by optometrists.

Decision binding

24(1) Subject to subsection (2), a decision made by a board pursuant to section 22 is binding on the minister.

(2) Every decision made by a board is subject to any decision made by the joint medical professional review committee established pursuant to subsection 49(1) of the Act or the joint optometric professional review committee established pursuant to subsection 49(3) of the Act, as the case may be.

R.R.S. c.S-29 Reg 14 repealed

25 *The Medical Care Insurance Payment Regulations* are repealed.

Coming into force

26 These regulations come into force on November 1, 1994.

SASKATCHEWAN REGULATIONS 74/94

The Saskatchewan Farm Security Act

Section 109

Order in Council 711/94, dated October 25, 1994

(Filed October 26, 1994)

Title

1 These regulations may be cited as *The Farm Land Lease-back Amendment Regulations, 1994*.

R.R.S. c.S-17.1 Reg 2 amended

2 *The Farm Land Lease-back Regulations* are amended in the manner set forth in these regulations.

Section 6 amended

3 Subclause 6(2)(b)(ii) is repealed and the following substituted:

“(ii) with respect to each subsequent calendar year, prior to September 30 in the calendar year in which assistance is being requested, or at any later date that the Minister of Agriculture and Food may allow due to special circumstances”.

Section 13 amended

4 Section 13 is amended:

(a) by striking out “dollars per animal unit per month” and substituting “dollars per animal unit month”; and

(b) by striking out “AUM is the number of animal unit months per acre” and substituting “AUM is the number of animal unit months per 160 acres”.

Section 17 amended

5 Section 17 is amended:

(a) in subclause (2)(a)(i) by striking out “is in force” and substituting “began”; and

(b) by repealing clause (3)(a) and substituting the following:

“(a) prior to the day when a valid signed lease pursuant to sections 27.1 to 27.9 of the Act begins”.

Coming into force

6 These regulations come into force on the day on which they are filed with the Registrar of Regulations.

SASKATCHEWAN REGULATIONS 75/94

The Education Act

Clause 9(g)

Minister's Order, dated October 11, 1994

(Filed November 2, 1994)

Title

1 These regulations may be cited as *The Teacher Certification and Classification Amendment Regulations, 1994*.

R.R.S. c.E-0.1 Reg 2 amended

2 *The Teacher Certification and Classification Regulations* are amended in the manner set forth in these regulations.

Section 5 amended

3(1) Subsection 5(1) is repealed.

(2) Subsection 5(2) is amended by striking out "After June 30, 1985, the" and substituting "The".

Section 7 repealed

4 Section 7 is repealed.

Coming into force

5 These regulations come into force on the day on which they are filed with the Registrar of Regulations.

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