PUBLIC HEALTH ACT

ALBERTA AIDS TO DAILY LIVING AND EXTENDED HEALTH BENEFITS REGULATION

Alberta Regulation 236/1985

With amendments up to and including Alberta Regulation 109/2003

Office Consolidation

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Alberta Queen’s Printer
Suite 700, Park Plaza
10611 - 98 Avenue
Edmonton, AB T5K 2P7
Phone: 780-427-4952
Fax: 780-452-0668

E-mail: qp@gov.ab.ca
Shop on-line at www qp.alberta.ca
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Note

All persons making use of this consolidation are reminded that it has no legislative sanction, that amendments have been embodied for convenience of reference only. The official Statutes and Regulations should be consulted for all purposes of interpreting and applying the law.
In this Regulation,

(a) “authorizer” means a person who is appointed as an authorizer under section 4;

(b) “disabling condition” means a chronic condition that, in the opinion of the Minister or his delegate having regard to the advice of a physician, so severely impairs a person that it causes him to be dependent on a health aid or an extended health benefit;

(c) “extended health benefit” means equipment, supplies, services or an appliance designated by the Minister as an extended health benefit under section 3;

(d) “general hospital” means general hospital as defined in the Hospitals Act and includes a mental hospital as defined under the Mental Health Act;

(e) “health aid” means equipment, supplies, services or an appliance designated by the Minister as a health aid under section 3;

(f) “provide” includes paying for all or part of the cost of providing.

The Minister may provide a health aid to a resident of Alberta

(a) who holds a valid registration under the Alberta Health Care Insurance Act,

(b) who is suffering from a disabling condition, and

(c) for whom a health aid has been authorized by an authorizer.

The Minister may provide an extended health benefit to

(a) a resident of Alberta
(i) who holds a valid certificate of registration under the Health Insurance Premiums Act,

(ii) who is suffering from a disabling condition, and

(iii) for whom an extended health benefit has been authorized by an authorizer,

who is 65 years of age or older, or who is the recipient of a widows’ pension under the Widows’ Pension Act,

and

(b) a spouse or adult interdependent partner or dependant of the resident referred to in clause (a) if the spouse or adult interdependent partner or dependant is registered under the same certificate of registration under the Health Insurance Premiums Act.

(3) Notwithstanding subsections (1) and (2), the Minister may refuse to provide a health aid or an extended health benefit to a person who is eligible for a similar health aid or extended health benefit under the Department of Veterans Affairs Act (Canada), the Workers’ Compensation Act or the Motor Vehicle Accident Claims Act or from a private insurer, or who is eligible for compensation under the Criminal Injuries Compensation Act in respect of the disabling condition.

(4) Notwithstanding subsections (1) and (2), the Minister may provide a health aid

(a) to a person who is a patient in a general hospital, only if the authorizer certifies that the provision of the health aid is part of the discharge plan for that patient, or

(b) to a person residing in any institution operated by the Minister, a nursing home or an auxiliary hospital, only if the authorizer certifies that the health aid will be identified for and exclusively used by that person.

(5) The Minister shall not provide any services under this Regulation relating to the installation of a health aid.

3 The Minister may designate

(a) the types of health aids or extended health benefits that may be provided,

(b) additional eligibility criteria that must be met in respect of each health aid or extended health benefit,
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AR 236/85 s3;109/87;223/90

(c) the nature of the assessment and the authorization required for the determination of eligibility for a health aid or extended health benefit,

(d) the maximum number of health aids or extended health benefits that may be provided and the frequency with which they may be provided to any person,

(e) the maximum cost of a health aid or extended health benefit that may be paid for the purchase or supply of a health aid or extended health benefit,

(e.1) the portions of the cost of a health aid or extended health benefit provided under this Regulation that are to be borne respectively by the Minister and the person to whom the aid or benefit is provided,

(e.2) the manner in which the cost of a health aid or extended health benefit may be paid and the persons to whom the costs are to be paid, the conditions of payment and the information required to be submitted in connection with claims for payment of the costs, and

(f) any other conditions under which health aids or extended health benefits may be authorized.

AR 236/85 s4

4(1) The Minister may appoint as an authorizer for a term designated by him any person who

(a) has successfully completed a training program for authorizers that is satisfactory to the Minister,

(b) holds professional qualifications satisfactory to the Minister,

(c) is a resident of Alberta, and

(d) is not directly or indirectly engaged in the supply of a health aid or an extended health benefit.

(2) An authorizer may authorize the provision of a health aid or an extended health benefit to a person in accordance with this Regulation.

(3) If the Minister is satisfied that an authorizer has not complied with this Regulation he may terminate the appointment of that authorizer.

AR 236/85 s4
4.1(1) The Minister may establish 1 or more appeal panels to hear appeals from decisions of the Minister or his designate under this Regulation relating to the eligibility of a person for cost sharing in respect of a health aid or an extended health benefit provided or to be provided to the person by the Minister.

(2) In making its decision, an appeal panel may consider any extenuating financial or other circumstances of a person to whom a health aid or an extended health benefit is provided or to be provided to the person by the Minister.

(3) The Minister may, with respect to an appeal panel established under subsection (1),
   (a) appoint or provide for the appointment of its members,
   (b) prescribe the terms of office of its members,
   (c) designate a chairman, vice-chairman and secretary,
   (d) authorize, fix and provide for the payment of expenses to its members and remuneration to its members who are not employees of the Government, and
   (e) prescribe the number of members of the appeal panel that constitutes a quorum.

(4) The *Administrative Procedures Act* applies to proceedings of an appeal panel under this section.

(5) An appeal panel may confirm, reverse or vary the decision of the Minister or his designate, and the decision of the appeal panel is final.

AR 265/87 s2

4.2(1) An appeal under section 4.1 may be commenced by
   (a) any person who is affected by a decision of the Minister or his designate under this Regulation, or
   (b) an agent of a person referred to in clause (a).

(2) An appeal shall be commenced by a notice in writing served on the Manager of Alberta Aids to Daily Living and Extended Health Benefits not later than 60 days after the date on which an authorization form is signed by an authorizer.

AR 265/87 s2

5 If a person is informed on being provided a health aid or extended health benefit that the health aid or extended health
benefit must be returned to the Minister when it is no longer needed by that person, the Minister may require that person to return the health aid or extended health benefit at such time and under such conditions as may be prescribed by the Minister.

AR 236/85 s5

6 The *Alberta Aids to Daily Living and Extended Health Benefits Regulation* (Alta. Reg. 150/84) is repealed.

AR 236/85 s6