

Billing Information Sheet – For Physicians

Referrals Outside Canada – Patient Coverage

April 20, 2022

Coverage Overview:

Non-emergency, or elective, medical services are deemed to be **pre-arranged health services** that are **not the result of an unforeseen or unanticipated medical situation**. Section 9.1 of *The Medical Care Insurance Beneficiary and Administration Regulations*, stipulates coverage for elective medical services **must have prior approval** from the Ministry of Health **before** the service is obtained. Without this prior approval, regulations ~~does~~ not provide reimbursement to the patient. It is strongly recommended prior approval is obtained before a patient referral is made outside of Canada.

The costs of travel, accommodation and meals to access medical services are not insured under Saskatchewan's health system.

Request for Coverage:

As outlined on Page 9 in the Saskatchewan Physician Payment Schedule, the **written request must:**

- be received from a Saskatchewan specialist in the same field of practice as the required service;
- describe the circumstances of the case, including pertinent clinical details and diagnosis;
- clearly describe the specific and detailed nature of the service(s) being requested;
- confirm, to the best of the specialist's knowledge, that the service(s) being requested are not obtainable within Canada; and,
- where possible, state the name and the location of the physician who would be providing this service.

Important Details:

- *Be specific about the requested service. Broad descriptions such as “detailed assessment”, “comprehensive multi-disciplinary assessment” or “further follow up” are generally insufficient.*
- *Clearly **DETAIL** and confirm the service(s) requested are **NOT** available in Canada. Where possible, include a summary of information on consultations and/or outcomes of those consultations with other Canadian specialist physicians, centres of excellence or specialty hospitals which were exhausted prior to the consideration of services outside of Canada.*
- *Submitting a request for prior approval **does not guarantee an approval for cost coverage**. Coverage decisions are based upon Saskatchewan legislation, supporting regulations and the medical and clinical information provided in the written request.*
- *The outcome of the review is provided in writing from the Ministry of Health to the requesting specialist. It is the **responsibility of the specialist physician** to follow-up with the patient regarding the outcome of the request and to discuss the patient's plan for ongoing care.*

More Information Resources:

- Visit www.ehealthsask.ca – Search “health coverage”
- Medical Services Branch, Ministry of Health
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