

Ontario.—The Ontario medical services insurance plan began paying benefits in July 1966. The plan offered to all eligible Ontario residents, on an individual and family enrolment basis, an insurance plan that covered most physicians' services.

The government pays, as a subsidy, the full premium of applicants who had had no taxable income during the preceding year, and of those who were recipients of public assistance; 50 p.c. of the premium for single applicants who had a taxable income of \$500 or less; 50 p.c. of the premium for families of two persons and with a taxable income of \$1,000 or less; and 60 p.c. of the premium for families of three or more persons and with a taxable income of \$1,300 or less.

Health Care Programs for Welfare Recipients under the Canada Assistance Plan.—For several years Nova Scotia, Ontario, Manitoba, Alberta and British Columbia have financed most of the cost of providing certain personal health care services under programs for welfare recipients in specified categories. In Newfoundland the basis of eligibility was certification by area welfare officers of the need for specific services. During the past three or four years the trend has been to eliminate categorical status (age, disability, blindness, unemployment) as the basis of eligibility and to shift the emphasis toward tests of need applied to specific individuals and families who find themselves unable to pay for services or to purchase insurance. Such tests take into account the available income of an applicant and his or her minimum living requirements.

Enactment of the federal Canada Assistance Plan in 1966 resulted in the expansion of many existing provincial programs and in the introduction of legislation in other provinces so that, in the development of their programs, they would benefit from the cost-sharing provisions of the Plan (retroactively effective to Apr. 1, 1966). By mid-1967 programs involving payment to physicians and, frequently as well, to dentists, pharmacists, optometrists and others were in operation in all provinces.

The range of physicians' services covered in the benefits is usually comprehensive and includes medical visits in the home, office and hospital, and surgery, diagnostic services and obstetrical care. There are virtually no restrictions as regards medically required care and no limitations arising from pre-existing conditions or extra charges imposed on patients at time of receiving medical service. Other benefits that may be available include appliances, physiotherapy, special duty nursing, chiropody, medically required transportation, eye glasses and other aids, chiropractic, and home nursing. Typically, where these are benefits, restrictions related to misuse or overuse are imposed through such devices as waiting periods, prior authorizations, or co-charges.

Subsection 4.—Services for the Disabled and Chronically III

The success of rehabilitation programs for injured workers, veterans, handicapped children and other disability groups has encouraged more recent efforts to extend such services to all handicapped persons. Physical medicine and rehabilitation departments have been established in teaching hospitals and in most veterans' and children's hospitals. There are some 40 children's hospitals and rehabilitation centres located in the main cities across Canada and children are also treated at general hospitals and at 17 rehabilitation centres that serve both adults and children. Four rehabilitation centres are operated under workmen's compensation programs. Services for veterans are dealt with at pp. 350-351.

Hospital services available to in-patients and out-patients include physical medicine, physiotherapy, occupational therapy, social services and, in most children's and teaching hospitals, speech therapy; in addition, children's hospitals and centres operate special education classes. The rehabilitation centres provide comprehensive medical, psychosocial