

In Saskatchewan and New Brunswick, certain beneficiaries may be obliged to pay a portion of the cost.

The governments of Ontario and Nova Scotia subsidize recipients of local welfare allowances who purchase drugs provided under municipal programs, and pay the full cost of drugs in certain cases of special need. Ontario also provides patients of nursing homes and persons receiving assistance under the government's province-wide family benefits program with free prescription drugs from a formulary of 1,200 items.

In 1973 and 1974 many provinces were broadening pharmaceutical benefit coverage to include the aged, often without tests of need or income. Costs in such instances would not necessarily be sharable with the federal government under the Canada Assistance Plan.

Nova Scotia began a program on October 1, 1974 to provide prescription drugs without charge for all residents aged 65 years or over.

Quebec's program, begun in 1972 for social assistance recipients, was extended on January 1, 1974 to include Old Age Security pensioners whose financial need entitled them to the maximum Guaranteed Monthly Income Supplement. Coverage was further extended on January 1, 1975 to all recipients of the Supplement.

Ontario's program for the needy has, since September 1, 1974 included those persons aged 65 and over whose financial status entitles them to the Monthly Income Supplement. In the Budget Address of April 7, 1975, Ontario announced that as of August 1, 1975, this program was to be broadened to include all persons 65 and over.

Manitoba began a program on May 25, 1973, which reduced the cost of prescription drugs for all Old Age Security pensioners. The beneficiary paid the first \$50 of the drug costs in a year for each member of his family and 20% of the rest. Beginning January 1, 1975, the program was extended to the entire population and the \$50 deductible was applied only once to each family instead of to each person.

Since July 1, 1974, the voluntary Alberta Blue Cross organization has administered a plan that provides prescription drugs to all residents aged 65 or over and all recipients of War Veterans Allowances. The recipient pays 20% of the cost of each prescription. (The benefits of this program also include eyeglasses, hearing aids, dental care, and certain appliances, all subject to limitations of volume and cost.) Persons under 65 years have the option of enrolling with an added premium; they are charged a deductible of \$15 a year for drugs.

British Columbia since January 1, 1974, provides free prescribed drugs, including prescribed "over-the-counter" medications, to all persons aged 65 or over who have resided in the province for 90 days.

Most provinces also supply, through health department auspices, certain drugs that are important in the treatment of diseases, such as venereal disease, rheumatic fever, tuberculosis, or cystic fibrosis, where therapy costs can be very high.

Still other additional benefits are made available in some provinces to patients with specific conditions, costs of treatment for which can be catastrophic for individual families. As an example, in Saskatchewan provision was made in 1973 for full payment of the cost of prescribed drugs, up to a limit of \$1,000 a year per patient, required by any resident with chronic end-stage kidney disease who is receiving kidney dialysis or transplant.

Dental care benefits. Dental benefit plans are operated for selected recipients of welfare in most provinces. In British Columbia, public-assistance recipients can qualify through special means tests for enrolment. A separate program is operated in that province for the children, under 13 years of age, of all welfare recipients. The Ontario program provides dental benefits to persons in receipt of mothers' allowances and dependent fathers' allowances and their children under the age of 18; provincial assistance is also available for essential dental services for others, at municipal discretion. All provincial public-assistance recipients qualify for dental benefits under schemes operated in Alberta and Saskatchewan, and for selected categories of recipients in Manitoba.

Benefits under these dental plans typically exclude certain specified services and require prior authorization for some services. In the three most western provinces, posterior bridgework, prophylaxis, and paedodontics are excluded. Prior authorization is required in British Columbia and Saskatchewan for dentures, relines, gold inlays, orthodontia, and periodontia. Payments to dentists are at negotiated fixed rates under each of these plans.