provided, and they cannot extra-bill. They may choose to be paid directly by the board, or indirectly by the patient, who is in turn reimbursed by the board.

Doctors who choose not to participate must collect all fees (except for emergency care) from the patient, who cannot, unlike in other provinces, seek reimbursement from the provincial agency. He must pay the entire amount.

Part of the provincial share of costs is financed by a tax on wage and salary earnings. Each taxpayer whose net income in a year equals or exceeds $5,957 if married, or $3,931 if single, contributes 1.5% of such income, up to a maximum contribution of $235 for employees who get at least three quarters of their income from wages and salaries and $375 for others. Employers also contribute 1.5% of their entire payroll. Persons who have earnings below the income thresholds and all welfare recipients are covered without payment of the tax on earnings.

Prince Edward Island (December 1970). Benefits are comparable to those in other provinces. Registration is required but is not a condition of eligibility. The provincial share of costs is met from general revenue. A doctor who decides to collect directly from his patient can extra-bill, but only up to the amount listed for the service in the medical association fee-schedule and only after obtaining the patient's written consent and notifying the provincial agency of the amount. A doctor who bills the provincial agency directly must accept its payment as payment in full unless he has obtained the patient's written consent.

New Brunswick (January 1971). Registration by the family head is required, although it is not an eligibility requirement. Doctors must indicate whether or not they intend to participate in the plan; if they so decide, they are obliged to accept the plan payment as payment in full. Those doctors who elect to deal directly with particular patients may extra-bill. The New Brunswick plan is generally comprehensive, including limited oral surgery in hospital.

The Northwest Territories (April 1971). Doctors who elect to submit accounts to the territorial insurance agency must accept as payment in full from the agency the amounts set forth in its benefit schedule. Those who choose to collect directly from patients must, initially, give notice to the agency that they are not participating, and must inform the patients beforehand of their intention. Refractions by optometrists are not covered. The territorial share of costs is met entirely from general revenues.

Because of isolated conditions in this far northern area, it is common, as in the outport areas of Newfoundland, for many doctors to work as salaried employees of third-party institutions and agencies.

The Yukon Territory (April 1972). The plan employs premium levies to finance its share of total costs. Registration is required, but coverage for insured services is not contingent on premium payment. Premiums are $57 a year for single persons, $111 for couples, and $132 for families of three or more. Employers are required to deduct the premiums from the wages or salaries of employees and remit the amounts deducted to the plan. Sharing of the cost of premiums under collective-bargaining agreements is permissible.

Premium assistance is available for low-income families. Individuals and families with no taxable income in the previous year are eligible to have the entire premium paid on their behalf. Half the premium is paid for single persons with taxable income of $500 or less, for couples with combined taxable income of $1,000 or less, and for families of three or more with combined taxable income of $1,300 or less. The federal government assumes responsibility for premium payments on behalf of native peoples.

Claims for payment may be made by a doctor either to the plan directly or to the patient. When a patient is billed directly, he must be supplied with an itemized account that can be used when seeking reimbursement from the plan. A doctor who elects to bill his patients can make any mutually satisfactory arrangement for remuneration, providing this is done prior to rendering service; otherwise he must accept what the plan pays as payment in full.