

eligible for the benefits of other plans administered by the provincial health department. These include a subsidized hearing aid plan; the provision of prosthetic and orthotic devices; provision of wheelchairs, walkers, commodes and other aids to daily living; a dental plan for children; a prescription drug plan.

Hospital in-patient benefits: standard ward and all approved available services. *Out-patient:* to the extent that a hospital is able to provide them.

Out-of-province benefits: (In-patient) in Canada: standard ward rate less co-insurance charge where applicable. Outside Canada: maximums apply as to rate and number of days of care. (Out-patient) in Canada: total amount charged. Outside Canada: total amount charged or a rate considered to be fair and reasonable.

Alberta. *Medical care benefits:* all medically required services of medical practitioners and certain surgical-dental procedures undertaken by dental surgeons in hospitals. *Additional benefits:* dental services rendered by dental surgeons as specified in regulations, optometric and chiropractic services and podiatric services and appliances. An optional health services contract is available through the commission providing Alberta Blue Cross Plan membership at reduced rates to residents who are not members of a group. For residents 65 and over and their dependents, the government provides a substantial portion of the cost of eyeglasses and a major portion of the cost of dentures and dental care; and assumes the cost of hearing aids and medical and surgical equipment, supplies and appliances.

Premium per month: single, \$6.40; family of two or more, \$12.80. The premiums are those for persons who do not qualify for premium assistance on account of limited income; premium exemption for basic, and for optional, coverage if member of a premium unit is 65 or over. Eligibility for hospital insurance depends on medical care insurance status.

Hospital in-patient benefits: standard ward and all approved available services. *Out-patient:* 100% of all out-patient procedures rendered by the hospital; 100% of all diagnostic and physiotherapy services rendered in approved facilities outside the hospital; 100% of all out-patient services provided by provincial cancer clinics; dietetic counselling services. The plan also provides an extensive nursing home benefit which is not eligible for a contribution to the province under the federal Hospital Insurance and Diagnostic Services Act. However, the province is being reimbursed under the Canada Assistance Plan for revenues lost due to implementation of universal nursing home coverage.

Out-of-province benefits: (In-patient) 100% of all approved in-patient charges in Canada. Outside Canada, at \$50 per day or the actual cost whichever is the lesser, less the authorized charges. For the newborn — \$9 per day or the actual cost, whichever is the lesser. (Out-patient) 100% of all services rendered by hospitals in Canada, at their respective approved rates. Outside Canada, for charges less than \$25, the actual amount; for charges exceeding \$25, the lesser of the amount charged by the hospital or the amount payable in Alberta, but not less than \$25.

Authorized charges: adults (excluding residents 65 and over and their dependents) and children (excluding newborn): \$5 for the first day in active treatment hospitals. Also excluded are inter-hospital transfers, admissions approved by cancer clinics, polio patients, recipients of social assistance from social services and community health department. Auxiliary hospitals: \$5 per day after 120 days.

British Columbia. *Medical care benefits:* all medically required services of medical practitioners and certain surgical-dental procedures undertaken by dental surgeons in hospitals. *Additional benefits:* optometry, chiropractic, naturopathy, physiotherapy, podiatry, orthoptic treatment and services of Red Cross nurses, special nurses and the Victorian Order of Nurses, orthodontic services for harelip and cleft palate. Free prescription drug program for residents 65 and over, and a universal pharmacare plan effective June 1, 1977 which protects individuals from financial hardship as a result of high prescription drug expenses.

Premium per month: single, \$7.50; two persons, \$15.00; family of three or more, \$18.75. The premiums are those for persons who do not qualify for premium assistance on account of limited income.

Hospital in-patient benefits: standard ward and all approved available services. *Out-patient:* emergency services, minor surgical procedures, day care surgical services, out-patient cancer therapy, psychiatric day care and night care services, day care rehabilitation services, narcotic addiction services, physiotherapy services, diabetic day care, and specified out-patient psychiatric services in designated hospitals, dietetic counselling services; cytology services operated by BC Cancer Institute and renal dialysis treatments in designated hospitals.

Out-of-province benefits: (in-patient) during a temporary period of absence that ends at midnight on the last day of the 12th month following the month of departure from province; maximum stay of 12 months unless otherwise approved; referral, if approved by deputy minister.