

Prince Edward Island. Hospital and medical care insurance plans are administered by commissions responsible to the provincial health minister. Both are non-premium plans covering all eligible residents. Benefit coverage is limited to the insured services of the national hospital insurance and medical care programs. There are no authorized charges for services provided.

Nova Scotia. The hospital insurance plan is administered by the provincial health department. The provincial medical care insurance plan called Medical Services Insurance (MSI) is operated by a conjoint public authority consisting of the Health Services and Insurance Commission and Maritime Medical Care Incorporated. The commission is responsible to the minister of health.

Maritime Medical Care Incorporated is a doctor-sponsored prepayment agency authorized to act on a non-profit basis as the administrative arm and fiscal agent to the public authority. It undertakes registration of insured residents and payment of claims for insured services. The corporation is permitted to continue its private sector activities, providing coverage for services that are not insured under the provincial medical care insurance plan.

Both provincial government plans are non-premium and cover all eligible residents. MSI coverage, apart from the insured services of the medical care program, includes additional benefits such as a dental insurance plan for children and a pharmacare plan for the elderly. There are no authorized charges for services provided under the provincial hospital insurance plan.

New Brunswick. Both the medical care insurance plan (officially called Medicare) and the hospital insurance plan are administered by the provincial health department. Both are non-premium plans covering all eligible residents.

In addition to insured medical care services, medicare coverage includes a prescription drug program for the elderly, for cystic fibrosis patients and for social service benefit recipients.

Authorized charges are made on admission to all hospitals. Charges for in-patient services are \$10 for persons under 65 and \$4.65 for those 65 and over. Charges for out-patient services are \$6 for those under 65 and \$2.65 for those 65 and over. Exemptions are provided for persons and their dependents receiving social aid, for certain specified illnesses and services, and under some circumstances of transfer or re-admission.

Quebec. The health insurance plan is administered by the Quebec Health Insurance Board, which administers a variety of programs and is responsible to the minister of

Canadians have had almost universal coverage for hospital insurance since 1961 and for medical care insurance since 1971. Some of the provinces have introduced additional benefits such as dental care for children, a prescription drug plan for the elderly, extended care in nursing homes, eyeglasses and hearing aids.

social affairs. The hospital insurance plan is administered by the ministry of social affairs. Both are non-premium plans which cover all qualified residents of Quebec.

Coverage of the Quebec health insurance plan includes a broad range of benefits beyond the insured services of the medical care program: dental services for children, a drug program for the elderly and social assistance beneficiaries, provision of prostheses, orthopedic and other appliances and of functional aids for the visually handicapped.

A feature of the Quebec plan is the 72 local community service centres used to provide primary care in health and social services. Their impact on providing services and the range of services varies from place to place. Many of the centres provide home care services.

The term "centres d'accueil" used in Quebec applies to child day care centres, transition centres, short-term rehabilitation centres, and supervised residences when lengthier rehabilitation processes are needed.