The New Brunswick plan, like others, is generally comprehensive, including limited oral surgery in hospital.

Northwest Territories

The NWT entered the national program on April 1, 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 the agency's 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 patient beforehand of their intention. As in the four Atlantic Provinces, refractions by optometrists are not benefits. Financing of the Territories' share of costs is 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, even though payments made by the insuring authority to these agencies, as to self-employed doctors, are on a fee-for-service basis.

Yukon Territory

With the entry on April 1, 1972, of this sparsely-populated area of 20,000 persons into the nation-wide program, virtually the entire eligible population of Canada was insured for hospital care and physicians' services.

Like five of the provinces, the Yukon plan employs premium levies to finance its share of total costs. Registration of all residents is required, but coverage for insured services is not contingent on premium payment.

Premiums are $78 a year for single persons, $150 for couples and $174 for families. Employers are required to deduct the premiums from the wages or salaries of employees and remit the amounts 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 amount of the premium paid on their behalf. Half the premium levies are 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 with taxable income of $1,300 or less. The Federal Government assumes responsibility for premium payments on behalf of native peoples for whom it accepts responsibility.

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