There is considerable variation among provinces, however, in the out-patient services covered by the Programme. Saskatchewan covers all emergency services as a result of injury plus all follow-up services (the hospitals are paid \$5 for each such visit); all tissue services (also at \$5 'a submission); all radiological and laboratory procedures and physiotherapy services where facilities and personnel are available; and all surgical and anaesthetic procedures (the non-medical component is covered under separate medical-care legislation). The four Atlantic Provinces provide comprehensive out-patient benefits involving laboratory and radiological diagnostic procedures and interpretations (all types in Newfoundland, and specified types in Nova Scotia, New Brunswick, and Prince Edward Island); use of radiotherapy and physiotherapy facilities (except for exclusion of radiotherapy facilities in New Brunswick); and emergency out-patient care including staff services, use of facilities and drugs (except in Newfoundland). Elsewhere, diagnostic services other than those required for emergency out-patient care are excluded, with the exception of diagnosis for minor surgical procedures in Manitoba. Emergency out-patient care following an accident is a benefit in British Columbia (on payment of a \$2 co-insurance charge), Manitoba, Quebec, Ontario, the Yukon, and the Northwest Territories. Manitoba and Quebec also include out-patient services for minor surgical procedures, and electro-shock therapy. In Quebec out-patient services include also psychiatric day care and night care in specified hospitals, as well as insulin therapy. Alberta is the only province without any out-patient benefits generally available, though for the specific group of provincial public-assistance recipients Alberta provides one of the most comprehensive ranges of out-patient benefits in Canada.

- 2 .

2 8 3 9 4 9 7 2 4 3 7 4

<u>Coverage</u>: Each province makes insured services available to all its residents on uniform terms and conditions, and without exclusion on grounds of age, income or pre-existing conditions. Residents of the province are defined in the federal regulations as persons legally entitled to remain in Canada who make their home and are ordinarily present in the province; tourists, transients or visitors to the province are specifically excluded.

Residence: Although no specified period of residence is required, there are waiting periods for benefits not exceeding three months in some provinces. Insured persons resident in one province who move to another have continuing coverage on change of residence by remaining residents of the province from which they have moved during any waiting period required in the one to which they move.

Financing: Methods by which provincial authorities obtain revenue for financing differ among the provinces. The premium method is used in Saskatchewan, Manitoba and Ontario. The annual premium in Saskatchewan, or hospitalization tax as it is called, is, for 1964, \$20 for single persons and \$40 for families. The hospitalization tax is augmented by general revenue. The Manitoba premium is \$24 a year for single persons and \$48 for families, and these funds are augmented from general revenue. The Ontario monthly premium is \$2.10 for single persons and \$4.20 for families; there is a compulsory payrolldeduction clause applying to establishments of 15 or more employees, while for others coverage is voluntary.

Newfoundland, Quebec, Prince Edward Island, New Brunswick, Alberta, and British Columbia finance their share of costs out of general revenue. In Nova Scotia, there is a five percent hospital tax (on sales).

Only two provinces levy charges directly on patients for insured services. These deterrent or co-insurance charges are related to in-patient services in British Columbia, where a charge of \$1.00 a day for hospital care is imposed, and in Alberta, where the charge varies between \$1.50 and \$2.00 a day (\$1.00 a day for a newborn child), depending on the category of the hospital.

Other Provincial Health Programmes

In addition to the hospital insurance and diagnostic services programme, other services provided include: