

Each province and territory makes at least some use of general tax revenues to finance its program. Newfoundland, Prince Edward Island, New Brunswick, Quebec and the Yukon Territory finance entirely from this source. Nova Scotia and British Columbia, in addition, impose a general sales tax and use part of the proceeds to assist in the financing of hospital care. Ontario raises about 40 per cent of its cost by a premium of \$66 a year for single persons and \$132 for families. Manitoba finances part of its cost from annual premiums or taxes of \$43.20 for single persons and \$86.40 for families. Saskatchewan levies annual premiums or taxes of \$24 for single persons and \$48 for families, together with a general sales tax under the Education and Health Tax Act. Alberta levies an annual premium of \$69 for single persons and \$138 for families under the Health Insurance Premiums Act, which includes both hospital and medical-care insurance.

In Saskatchewan, Alberta, British Columbia, and the Northwest Territories, part of the financing is derived from co-insurance charges or utilization fees. These charges, designated in the regulations as "authorized charges", are payable by the patient at the time of service and are deductible from provincial payments to hospitals. Saskatchewan charges \$2.50 a day for the first 30 days of adult or child in-patient care and \$1.50 a day for the next 60 days. There is no charge after the ninetieth consecutive day of in-patient care. For out-patient physiotherapy services, \$1.50 a visit is charged. Alberta charges \$5 for the first day only of adult or child in-patient care in general hospitals; in auxiliary hospitals \$2 is charged for each day of care. British Columbia charges \$1 a day for in-patient care (except for newborn infants) and \$1 or \$2 for out-patient services, as previously mentioned. The Northwest Territories charges \$1.50 a day for in-patient care.

Medical-Care Insurance

In addition to hospital care under the hospital insurance and diagnostic services program, a number of other services, mainly those of physicians, are provided under a variety of prepaid arrangements.

Federal Medicare Legislation

The Medical Care Act was passed by the Canadian Parliament in December 1966, and became operative July 1, 1968. The Federal Government is now committed to contributing to participating provinces half the costs of insured services in provincial medical-care plans that satisfy the following criteria:

- a) are operated on a non-profit basis by a public authority subject to provincial audit;
- b) make available all medically necessary services rendered by medical practitioners as insured services on uniform terms and conditions to all residents of a province;