## Saskatchewan

## www.health.gov.sk.ca

Children's Drug Plan is available to all Saskatchewan children 14 years and under & they are automatically covered. Proof of eligibility not required at the pharmacy. There is a \$25 charge for drugs listed on the Saskatchewan Formulary including approved EDS drugs.

<u>Emergency Assistance for Drugs</u> is available for residents who require immediate treatment with covered prescription drugs and are unable to cover their share of the cost may access a one-time Emergency Assistance. The level of assistance provided is in accordance with the consumer's ability to pay. During Ministry of Health regular hours 30-day supplies are allowed to be dispensed—outside regular hours only 4-day supplies are allowed.

<u>Seniors' Drug Plan:</u> Eligible seniors 65 years and older pay only \$25 per prescription for prescription drugs listed on the Saskatchewan Formulary and those approved under Exception Drug Status. Eligibility is determined by income.

## Prescription Drugs

**Special Support Program** is an income-tested program that helps residents with high drug costs in relation to their income. Eligible applicants will receive a deductible and/or a co-payment on their prescription drugs for each calendar year.

<u>Supplementary Health Benefits</u> is for qualified individuals who are eligible for a number of health services and products in addition to the universal health benefits. If eligible, drug coverage is included in pre-defined plans that included other benefit types such as dental and medical items.

<u>Family Health Benefits</u> provides benefits to low-income working families with eligibility determined by Ministry of Social Services. Along with specific Extended Health Benefits, family drug coverage is included for prescription drugs per the Saskatchewan Formulary with \$100 semi-annual family deductible and 35 per cent consumer copayment thereafter.

<u>Palliative Care Drug Program</u> covers the costs of prescription drugs for palliative care patients who are in the late stages of terminal illnesses. Registered palliative care patients receive prescription drugs free, if listed in the Saskatchewan Formulary or approved under Exception Drug Status. It also covers some commonly used laxatives and other adjunctive medications, on prescription request. This program does not cover prescription drugs for cancer

	patients.
Lab & Diagnostic Tests	All medical necessary in-patient and out-patient hospital services provided by physicians are covered in a publicly funded facility.
Accommodation	Coverage for standard ward rooms only.
Ambulance	Ambulance ground service is not covered. Residents are responsible for the basic ambulance fee as well as a per-kilometer fee and a waiting time charge if applicable. There are programs to reduce fees for qualifying residents or fully cover fees for seniors.  Patients with valid health services card are charges a fee of \$350.00 per trip for air ambulance
Eye Examinations	An annual eye exam for all individuals age 17 and under and all individuals who have a confirmed diagnosis of type I or type II diabetes. Routine eye examinations, limited to one per 24-month period for 18 to 65 years of age or one per 12-month period at any other age.  Ocular emergencies are covered (for example - injury to the eyes or foreign body in the eye).
Intraocular Lens (IOL)	Standard hard/rigid as well as soft/foldable IOL's are covered once per lifetime per eye. (Regional Health Authorities determines coverage in the area)
Dental	Some oral surgery procedures required to treat specific conditions caused by accidents, infection, or congenital problem. Orthodontic services for cleft palate. Extracting teeth when medically required before undertaking certain procedures related to heart, chronic renal disease or total joint replacement. Dental implants are covered in exceptional situations and limited to circumstances related to tumours and congenital defects (cleft palate and metabolic disorders). Coverage will require a specialist in oral maxillofacial surgery to request prior approval from the Ministry of Health by submitting in writing information and rationale to support the request. Coverage is limited to the initial cost to provide dental implants and does not extend to ongoing maintenance costs.
Hearing Aids	Not covered.
Nursing & Home Care	Most health regions provide home care for free in Saskatchewan, including case management and assessment, home nursing and physical and occupation therapy service.

	There is a fee to cover part of the cost based on a person's income and the amount of services they receive for homemaking, respite care, meals and home maintenance.  Private home care services are not covered.
Physiotherapy	Full covered when services provided through hospitals, special care homes, community agencies or by private clinics in Saskatchewan that have a contract with the health districts. Private clinics that have contracts with Saskatchewan health regions typically provide a limited number of visits. These services can include assessment, intervention, consultation, prevention and education. Services obtained from private clinics not under contract with a Saskatchewan health region are not covered.
Chiropractic	Not covered by Saskatchewan Ministry of Health as of July 1, 2017.
Podiatry (Chiropody)	No coverage for services provided by private podiatry clinics. Patient is responsible for paying part of the cost of the visit and for any special custom shoe inserts that are prescribed.
Other Paramedicals	Services of an Occupation Therapist offered through hospitals, special care homes, home care and community based health programs. No coverage for massage therapy, acupuncture, naturopath, osteopath and homeopath services.
Medical Supplies	Some assistance through Saskatchewan Aids to Independent Living (SAIL) for ostomy supplies, prosthetics, oxygen and other medical items for chronic and disable patients.  Free loan of mobility aids such as crutches, wheelchairs, walkers, hospital beds, commodes and transfer assists through the Saskatchewan Abilities Council.
Travel	Covers most hospital and medical care in Canada by a reciprocal billing arrangement. Provides only limited coverage for emergency medical care from approved hospitals and emergency physician services received outside Canada if the same services would be covered in the province. Reimbursement will be provided at Saskatchewan rates.

NOTES: Green Shield Canada updates this information once per year, but Provincial Health Ministries update as required. This is intended as a general overview. For detailed information, contact the appropriate provincial Ministry of Health. GSC is not responsible for the accuracy of this information. It is to be used as a guideline only.