

Newfoundland & Labrador	www.health.gov.nl.ca
<p>Prescription Drugs</p>	<p>The Newfoundland and Labrador Prescription Drug Program (NLPDP) provides financial assistance for the purchase of eligible prescription medications for those who reside in the province. There are five main plans under the program: The Foundation Plan, The 65Plus Plan, The Access Plan, The Assurance Plan and The Select Needs Plan.</p> <p>The NLPDP is payor of last resort. This means, the NLPDP will pay prescription costs and other related benefits, for which a person is eligible, only where those services are not, or are no longer, reimbursable by a third party.</p> <p><u>The Foundation Plan</u> provides 100 per cent coverage of eligible prescription drugs for those who need the greatest support. This includes persons and families in receipt of income support benefits through the Department of Advanced Education and Skills, and certain individuals receiving services through the regional health authorities, including children in the care of Child, Youth and Family Services, and individuals in supervised care. No application is necessary. A Prescription Drug Program card is automatically issued when the Department of Health and Community Services is notified that an individual is in receipt of the above noted services.</p> <p><u>The 65Plus Plan</u> provides coverage of eligible prescription drugs to residents 65 years of age and older who receive Old Age Security Benefits (OAS) and the Guaranteed Income Supplement (GIS). No application is necessary. A Prescription Drug Program card is automatically issued when the Department of Health and Community Services is notified by Service Canada that an individual is in receipt of the Guaranteed Income Supplement (GIS) and Old Age Security benefits (OAS).</p> <p><u>The Access Plan</u> gives individuals and families with low incomes access to eligible prescription medications. The amount of coverage is determined by net income level and family status. The program is available to:</p> <ul style="list-style-type: none"> • families with children, including single parents, with net annual incomes of \$42,870 or less; • couples without children with net annual incomes of \$30,009 or less; • single individuals with net annual incomes of \$27,151 or less. <p>Application required.</p> <p><u>The Assurance Plan</u> provides prescription drug coverage to individuals/families where eligible drug costs exceed:</p>

	<ul style="list-style-type: none"> • 5% of net income for those who earn below \$40,000 • 7.5% of net income for those who earn from \$40,000 to under \$75,000 • 10% of net income for those who earn from \$75,000 to under \$150,000 <p>Qualifying applicants will be responsible for a co-payment depending on their income levels and drug costs. Application required.</p> <p><u>The Select Needs Plan</u> provides 100 per cent coverage for disease specific medications and supplies for residents with Cystic Fibrosis and Growth Hormone Deficiency. These benefits are supplied through an exclusive arrangement with Eastern Health. No application is necessary. When the Department of Health and Community Services is notified by Eastern Health that a client has been diagnosed with Cystic Fibrosis or Growth Hormone Deficiency they are given eligibility to the benefits offered under this plan.</p>
Lab & Diagnostic Tests	In-patient and out-patient services if performed in a hospital or accredited facility for laboratory, X-ray and other diagnostic procedures.
Accommodation	Standard ward no charge. Additional daily room charge for Semi-private and for private.(legislated)
Ambulance	<p>Residents who require transport by road ambulance within this province must pay a user fee of \$115/trip. Non-residents are required to pay an administration fee of \$125.00, a kilometer rate of \$1.84/km as well as the patient fee of \$115.00 per trip.</p> <p>If you are a resident patient in a health facility and are required to transfer to another facility and remain there, then the standard road ambulance fee applies. If a medical escort is required for inter facility transport an addition \$50/trip is charged to the patient. No charge if you are transferred to another facility (e.g. for diagnostic testing) and are expected to return. The full recovery for all services will be charged for non-residents.</p> <p>Residents must pay a \$130 per trip user fee if they are transported by air ambulance. Non-residents are charged on a cost recovery basis for an air ambulance transport, including the costs associated with aircraft, medical escorts (salary, meals, accommodations, etc.) and the road ambulance to and from the air ambulance.</p>
Eye Examinations	Not covered.

Intraocular Lens (IOL)	Standard hard/rigid lens covered once per lifetime per eye.
Dental	For children aged 12 and under, coverage for routine fillings and extractions, sealants and examinations every 6 months, cleanings every 12 months, some x-rays and fluoride applications every 12 months (for ages 6 to 12 only). Certain surgical-dental procedures which are medically necessary to be performed in hospital by a dentist or oral surgeon Routine, in-hospital, dental extraction are not covered.
Hearing Aids	100% of hearing aid costs (excluding batteries) covered for all individuals under 18 years of age, all full time students and any adult deemed unable to pay per government assessment. Batteries not covered.
Nursing & Home Care	Non-professional home support services are provided to the minimum level to maintain individual independence. Therapeutic and professional services based on eligibility criteria.
Physiotherapy	When prescribed by a physician and performed in a hospital.
Chiropractic	Not covered.
Podiatry	Not covered.
Other Paramedicals	Rehabilitative services if performed in a hospital for occupational therapy, audiology, and speech therapy.
Medical Supplies	The Special Assistance Program provides basic medical supplies and equipment to assist with activities of daily living for individuals living in the community who meet the eligibility criteria for the program. Benefits of the program include: dressings, catheters and incontinence supplies, oxygen and related equipment and supplies, braces, burn garments, wheelchairs and walkers.
Travel	Physician and hospital bills are paid at the equivalent of the provincial rate with daily maximums.
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.	