

A guide to accessing public drug coverage

As of April 2020, there are no changes to provincial processes, or eligibility for benefits; please refer to individual provincial programs for the most current information

BC British Columbia has a [PharmaCare program](#). Residents transfer to the public plan coverage upon hitting deductible/family maximum thresholds. The thresholds are based upon income levels from two years prior and coverage begins immediately if processed online. Residents can use the [Fair PharmaCare Calculator](#) to view an estimate of their financial assistance. **Contact** [B.C. PharmaCare](#)

AB In Alberta, residents could be eligible for the [Alberta Adult Health Benefit program](#), intended for low-income Albertans. The threshold for minimum income is \$16,580/year for singles and must include all income sources (including Employment Insurance). Coverage is summarized in the [Drug Benefit List](#) and [Drug Supplement List](#). **Contact** [Alberta Adult Health Benefit program](#)

One unique Benefit Plan offering is [Non-Group Coverage](#), which provides support in addition to private coverage for singles/families. For a [monthly premium](#), residents can access all medications covered under the Alberta Drug Benefit Program, but are still subject to pay up to \$25 for each prescription purchased. **Contact** [Alberta Blue Cross about Non-Group benefits](#)

SK In Saskatchewan, low income families who meet income test standards as per the Ministry of Social Services may have access to [Family Health Benefits](#). They will have access to prescription drugs on the drug formulary. For children, the full costs of medications are covered and for parents/legal guardians, they are required to pay a semi-annual deductible of \$100 and a 35% co-pay for each prescription. If additional drug coverage is required for the parents/legal guardians, they are required to apply through the Special Support program.

Residents can apply for additional coverage to the [Special Support Program](#) to help them with high drug costs in relation to their income. Eligible applicants receive a deductible and/or a co-payment on their prescription drugs for each calendar year. Total family income and total family drug costs will determine what the semi-annual deductible will be, as well as the co-payment per prescription. Once qualified, individuals have access to medications listed on the [Saskatchewan drug formulary](#).

Contact the Saskatchewan [Drug Plan and Extended Benefits](#)

MB The [Manitoba Pharmacare program](#) is a drug benefit program for eligible residents, regardless of disease or age, whose income is seriously affected by high prescription drug costs. Pharmacare is income tested - the deductible is calculated based on the [total adjusted family income](#). Once the yearly deductible has been reached through the purchase of eligible prescription drugs at a pharmacy, Pharmacare will pay 100% of eligible prescription costs for the remainder of the benefit year. **Contact** [the Manitoba Pharmacare program](#)

ON If an Ontarian no longer has access to a private drug plan, they could qualify for the [Ontario Drug Benefit](#) program. Ontarians will qualify for the Ontario Drug Benefit (ODB) program when they turn 65 years old or before they reach that age because they're:

- living in a: long-term care home, home for special care, Community Home for Opportunity
- 24 years of age or younger and not covered by a private insurance plan
- receiving professional home and community care services
- receiving benefits from [Ontario Works](#) or [Ontario Disability Support Program](#)

If drug costs are still a challenge, the [Trillium Drug Program is an additional resource that](#) is based on household income. For example, if an individual loses their job and goes on Employment Insurance but their partner does not, that is factored into the household income.

Contact the [Ontario Drug Benefit Program](#)

QC If you are living in Québec on a permanent basis, you must have prescription drug insurance coverage at all times. Generally, you are eligible for the [Public Prescription Drug Insurance Plan](#) administered by RAMQ if you do not have access to a private plan. In [5 or fewer questions](#), you can check whether you need to be covered by a private plan or the public plan. **Contact** the [RAMQ](#)

NB The [New Brunswick Drug Plan](#) is a prescription drug plan that provides drug coverage for uninsured New Brunswick residents who have an active Medicare card. Eligibility is based on [family income and has premiums and co-payments](#) (30% to a maximum per prescription). Following receipt of a properly completed application, coverage is usually available within about 1 week under normal circumstances.

Depending on household income, residents may also be eligible for coverage through [Social Development/Social Assistance](#). A valid health card is required, and the resident must enroll and meet the criteria. Once approved they have access to the same provincial drug formulary and have to pay a co-payment of \$4 for each prescription for adults (18 and over) and \$2 for children (under 18 years) up to a maximum of \$250 per family/fiscal year.

Contact [The New Brunswick Drug Plan](#)

NS The Nova Scotia Pharmacare Programs, which are Nova Scotia's public drug plans, help residents with the cost of prescribed drugs and devices which are indicated as benefits in the [Nova Scotia Formulary](#), as well as with the cost of some services.

- The [Nova Scotia Family Pharmacare Program](#) is a provincial drug insurance plan designed to help Nova Scotians with the cost of their prescription drugs. The Program offers protection against drug costs for families who have no drug coverage or if the cost of the prescription drugs becomes a financial burden to them.
- Clients of Income Assistance through the Employment Support and Income Assistance (ESIA) Act and Regulations are also eligible to receive Pharmacare benefits aligned to the NS Formulary. There is a maximum copay of \$5 per prescription with no premium or deductible.

The Program is available to all Nova Scotians with a valid Nova Scotia Health Card. The [electronic calculator](#) can be used to help determine annual family co-payment, deductible and out-of-pocket expense. **Contact** [The Nova Scotia Family Pharmacare Program](#)

NL 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 – three programs of note are [The Foundation Plan](#), [The Access Plan](#), and [The Assurance Plan](#). The NLPDP is payor of last resort, meaning it 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.

Contact [NLPDP the Prescription Drug Program](#)

PEI Residents may be eligible for coverage or financial assistance of approved medications and supplies if they meet the financial criteria, or have a medical condition identified in one of the various Drug Programs offered by [Prince Edward Island](#). Residents are eligible if they meet the medical criteria for a specific drug program, or if the cost of their medication is a financial burden they may be eligible for assistance with the cost of prescription medication.

- The [Catastrophic Drug Program](#) caps the amount of money individuals pay in one year for prescription medications, based on their household income.
- The [Diabetes Drug Program](#) provides assistance toward the cost of approved medications and supplies.
- The [Family Health Benefit Drug Program](#) supports low-income families by covering the cost of approved prescription medications for children under the age of 19, or aged 19 to 24 if a child is a registered full time student.
- The [Financial Assistance Drug Program](#) covers the cost of approved prescription and non-prescription medications for clients receiving Social Assistance.
- The Prince Edward Island [Generic Drug Program](#) is for Islanders under the age of 65 who do *not* have insurance. The program is designed to limit out-of-pocket costs for eligible generic prescription drugs to a maximum cost of \$19.95.

Contact [PEI Pharmacare](#)

Important: Patients transferring to a public drug plan should note that the public drug plan may have stricter criteria for accessing medication than their private plan, or they may be on a medication that is not listed on their provincial drug formulary.