Appendix 3: Characteristics of provincial prescription drug plans for recipients of social assistance, as of December 2006

	Cost-sharing strategy*			
Province	Premium	Deductible	User copayment	Maximum beneficiary contribution
British Columbia	Full coverage			
Alberta	Full coverage			
Saskatchewan	\$0	\$0	\$2/perscription	None
Manitoba	Full coverage			
Ontario	\$0	\$0	\$2/perscription	None
Quebec	\$0	\$8.33 monthly	25% of perscription cost	\$16.66 monthly
New Brunswick	\$0	\$0	Adults: \$4/perscription Children (< 18 years old): \$2/perscription	\$250/family annually
Nova Scotia	\$0	\$0	\$5/perscription	None
Prince Edward Island	Full coverage			
Newfoundland and Labrador	Full coverage			

^{*}Premium = fixed amount that a beneficiary must pay to be eligible for the reimbursement program; deductible = fixed amount or percentage of income that constitutes the first portion of the costs that must be borne by the beneficiary before the insurer shares payment; copayment = fixed amount, percentage of the prescription cost or percentage of income that is not reimbursed by the insurer but must be borne by the beneficiary; maximum annual beneficiary contribution = maximum amount a beneficiary will have to pay in a given year.