

Gap Analysis

Access to depression medications in Canada

CEADM | Summary | Confidential | Draft

Conducted by Nanos for Canadians for Equitable Access to Depression Medication, October 2019
Submission 2019-1457



Report Card

Access to medication - Canada

Category	High access	Average access	Low access	Comment Strengths and areas for improvement
Ensuring access to medication	Government performance		✓	On average, two thirds of generic and brand name drugs with an indication for Major Depressive Disorder are listed on provincial formularies. However, coverage is determined through restrictive and complicated provincial plans.
	Public opinion		✓	Only one in four of Canadians say the government is doing a very good or good job ensuring access to medications for depression.

Mean number of **generic** drugs listed across Canada

17 of 25

Highest number of drugs listed

Nunavut
21 of 25

Median number of **generic** drugs listed across Canada

17 of 25

Lowest number of drugs listed

Manitoba and Northwest Territories
14 of 25

Mean number of **brand name** drugs listed across Canada

17 of 25

Highest number of drugs listed

Newfoundland and Yukon
19 of 25

Median number of **brand name** drugs listed across Canada

17 of 25

Lowest number of drugs listed

Manitoba and Northwest Territories
13 of 25

Government performance scores are based on desk research. To determine access to medication, Nanos cross-referenced a list of 25 medications approved by Health Canada with an indication for Major Depressive Disorder and cross-referenced against all provincial and territorial formularies in August/September 2019.

Public opinion scores are based on an RDD dual frame (land- and cell-lines) hybrid telephone and online random survey of 1,000 Canadians, 18 years of age or older, between August 29th to September 4th, 2019 as part of an omnibus survey. The margin of error for this survey is ±3.1 percentage points, 19 times out of 20.

This research was commissioned by Canadians for Equitable Access to Depression Medication (CEADM) and the research was conducted by Nanos Research.

Report Card

Medication approval - Canada

Category	Fast approval	Medium approval	Slow approval	Comment Strengths and areas for improvement
Timeframe for including new medication on public plans	Government performance		✓	Since 2003, the CADTH (Canadian Agency for Drugs and Technologies in Health) Common Drug Review took on average 340 days to reach a recommendation on four drugs. None were recommended to be listed.
	Public opinion		✓	Most Canadians think that the government should decide whether medications should be included on provincial formularies within a time frame of less than a year (44%) or a year (25%).

Brand name	Active ingredient	CDR decision	Evaluation timeframe	BC	AB	SK	MB	ON	QC	PE	NB	NS	NL	NU	YK	NW
Abilify*	Aripiprazole	Do not list	511 days	Red	Green	Red	Green	Red	Red	Red	Red	Red	Red	Red	Green	Red
Viibryd	Vilazodone	None	-	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
Cipralex	Escitalopram oxalate	Do not list	329 days	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	Green	Green
Trintellix	Vortioxetine	Under review	-	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
Cymbalta*	Duloxetine hydrochloride	Do not list	287 days	Red	Green	Green	Green	Green	Red	Red	Green	Red	Red	Red	Green	Red
Pristiq*	Desvenlafaxine succinate	Do not list	231 days	Green	Red	Red	Red	Yellow	Red	Red	Red	Green	Green	Red	Red	Red

Technologies in Health) Common Drug Review since its establishment in 2003.
 Public opinion scores are based on an RDD dual frame (land- and cell-lines) hybrid telephone and online random survey of 1,000 Canadians, 18 years of age or older, between August 29th to September 4th, 2019 as part of an omnibus survey. The margin of error for this survey is ±3.1 percentage points, 19 times out of 20.
 This research was commissioned by Canadians for Equitable Access to Depression Medication (CEADM) and the research was conducted by Nanos Research.
 * Abilify and Cymbalta are listed on all drug formularies, in the provinces marked in red it is not listed for a Major Depressive Disorder indication.
 * Pristiq is listed on the British Columbia, Ontario, Nova Scotia and Newfoundland Labrador formulary, however is it not covered by any benefit plans.

On behalf of the CEADM, Nanos conducted a gap analysis of access to depression medications in different jurisdictions across Canada. Nanos retrieved and compiles information on:

- number of generic and brand name drugs listed on formularies in each jurisdiction;
- the timeframes and recommendations of the CADTH CDR drug review process;
- the prices of drugs listed on provincial drug formularies;
- the co-pay and deductibles charged by the provincial drug plans; and,
- drug plan policy coverage for the general population and special groups.

The data is presented in a “report card” format that allows the reader to easily compare the differences and similarities between jurisdictions.

Further methodological details are available in each section.

The National Report Card was developed in collaboration with the Canadian Mental Health Association, funded by a collaboration agreement grant provided by Lundbeck Canada Inc. and Janssen Inc. We thank the Canadian Mental Health Association, Lundbeck Canada Inc. and Janssen for the useful discussions and industry fact-checking.



Executive Summary

Comparison of drugs listed by provincial plans

Comparison of CADTH CDR recommendations

Mandated generic substitution

Co-pay and deductible amounts comparison

Provincial drug plan coverage

Nanos Research was retained by Canadians for Equitable Access to Depression Medications (CEADM) in order to conduct a gap analysis of access to depression medications in different jurisdictions in Canada. To follow are the key findings of the research.

Drugs listed on formularies

- **Generic drugs** – On average across Canada, 17 of the 25 generic medications with an indication for Major Depressive Disorder that were surveyed are listed. Newfoundland and British Columbia have the highest number of drugs listed (20 and 18 out of 25, respectively) and Manitoba and Quebec have the lowest number of drugs listed (14 and 15 out of 25, respectively).
- **Brand name drugs** – On average across Canada, 17 of the 25 brand name medications with an indication for Major Depressive Disorder that were surveyed are listed. Newfoundland and British Columbia have the highest number of drugs listed (19 and 18 out of 25, respectively) and Manitoba has the lowest number of drugs listed (13 out of 25).
- **Drugs listed in the territories** – Among the territories, Nunavut lists 21 of the 25 generic drugs surveyed, followed by Yukon (19 of 25) and the Northwest Territories (14 of 25). With regards to brand name drugs listed, Nunavut and Yukon list 17 of 25 medications, respectively, followed by the Northwest Territories (13 of 25).

Common Drug Review Recommendations

- **Estimated timeframe for issuing a recommendations** – The estimated timeframe for issuing a recommendation is 340 days.
- **Recommendations issued** – Of the six medications with an indication for major depressive disorder reviewed by CADTH since 2005, none were recommended to be listed on provincial formularies.

The estimated timeframe for the CDR to issue a recommendation on drug coverage is 340 days.

Most frequently, provinces offer special programs for drug plan coverage for seniors and youth.

Mandated Generic Substitution

- **Mandated generic substitution** – All Canadian provinces have a policy of covering the lowest-cost alternative or setting a maximum reimbursable price for medicines.

Co-pay and deductibles

- **Co-pay** – All provinces, except Manitoba, charge a co-payment per prescription. Where charged as percentage, co-payments can range from 20% to 70% of the prescription cost price. Some provinces set a maximum payable amount. Of note, although no co-payment is applicable in the Yukon, coverage is limited in the territory.
- **Deductibles** – All provinces, except Newfoundland and Prince Edward Island, charge either a deductible or a premium. Deductibles and premiums are generally calculated as a function of family income.

Drug plan coverage

- **Provincial coverage** – Coverage policies vary greatly across the provinces but is generally income dependant with lower income families receiving higher coverage at lower costs. Most frequently, provinces offer special programs for seniors and youth.
- **Federal coverage** – Federal programs include the Interim Federal Health Program, the Non-Insured Health Benefits Program, the Correctional Service of Canada Health Services, the Veterans Affairs Treatment Benefits, Canadian Forces Drug Benefit Plan, and RCMP Health Benefits Program.

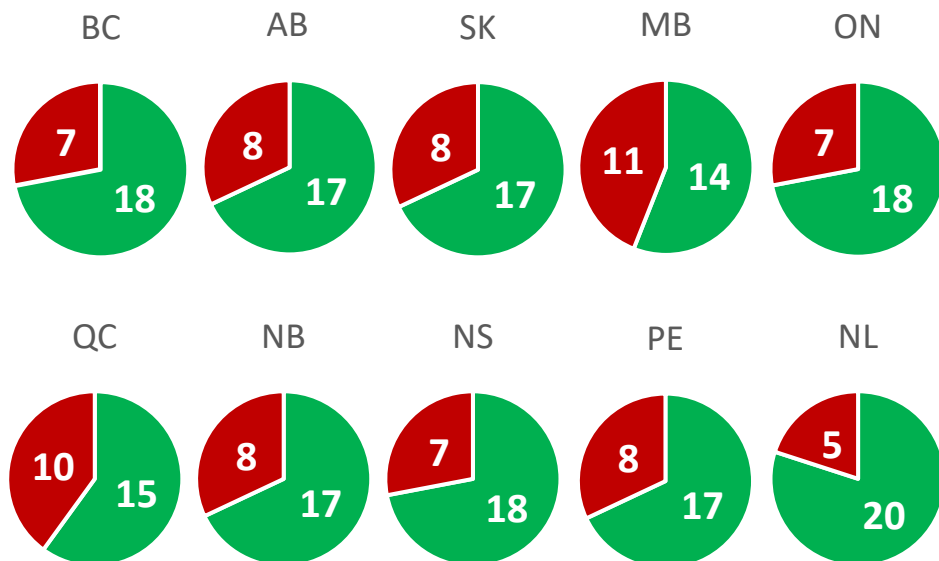
Methodology for comparison of drugs listed on provincial plans

To follow is the methodology for retrieving and comparing drug listed on provincial formularies across Canada:

- A list of 25 medications approved by Health Canada with an indication for Major Depressive Disorder was compiled based on information from CAMH and CADTH.
- The list of medications was cross-referenced against all provincial and territorial formularies in August/September 2019.
 - When cross-referencing the approved medications against the provincial and territorial formularies, three of the medications were not listed (vortioxetine, levomilnacipran and vilazodone)
- The slides that follow show the number of generic and brand name medications listed or not listed in each province or territory, as well as the average and median number of drugs listed nationally, across all provinces and territories.
- Readers should note that this includes three medicines listed by the CMHA that have been discontinued.

Number of generic depression medications listed on provincial plans

Generic drugs listed



 Number of drugs not listed  Number of drugs listed

Mean number of generic drugs listed across Canada

17 of 25

Median number of generic drugs listed across Canada

17 of 25

Highest number of drugs listed

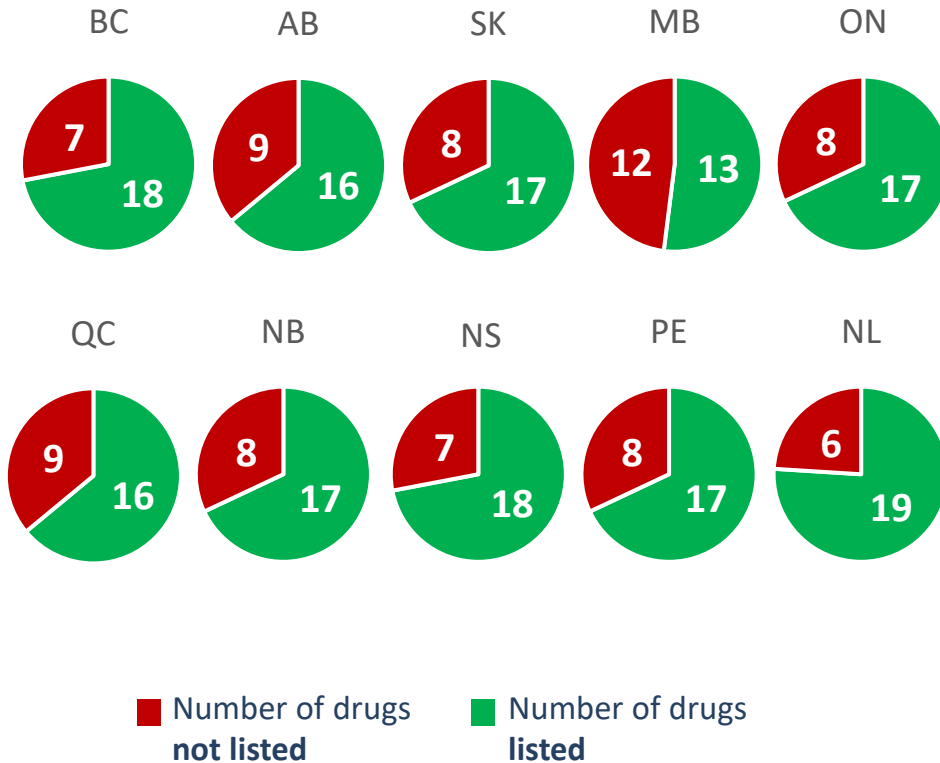
Newfoundland
20 of 25

Lowest number of drugs listed

Manitoba
14 of 25

Number of brand name depression medications listed on provincial plans

Brand name drugs listed



Mean number of brand name drugs listed across Canada

17 of 25

Median number of brand name drugs listed across Canada

17 of 25

Highest number of drugs listed

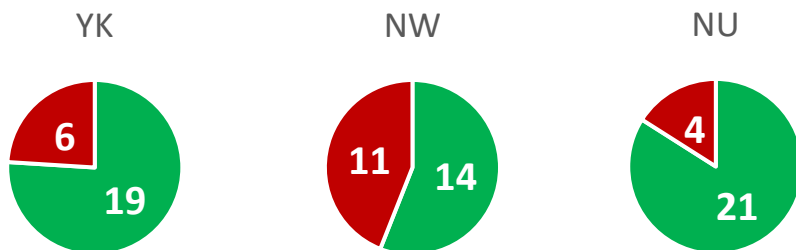
Newfoundland
19 of 25

Lowest number of drugs listed

Manitoba
13 of 25

Number of depression medications listed on territorial plans

Generic drugs listed



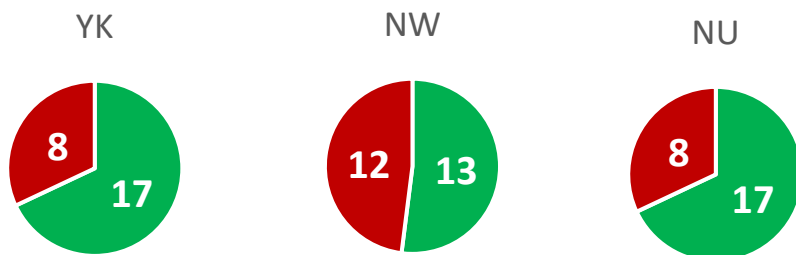
Highest number of generic drugs listed

Lowest number of generic drugs listed

Nunavut
21 of 25

Northwest Territories
14 of 25

Brand name drugs listed



Highest number of brand name drugs listed

Lowest number of brand name drugs listed

Nunavut and Yukon
17 of 25

Northwest Territories
13 of 25

 Number of drugs not listed  Number of drugs listed

Methodology for comparison of CADTH CDR recommendations

- In 2003, the CADTH (Canadian Agency for Drugs and Technologies in Health) Common Drug Review was established to provide pan-Canadian recommendations for drug reimbursement.
- CDR considers clinical effectiveness, safety, and cost-effectiveness of the drugs in order to issue its recommendations.
- Provincial and federal drug plans may also consider their mandates, jurisdictional priorities and budget impact in their coverage decisions.
- Nanos retrieved the following information on the six drugs with an indication for Major Depressive Disorder listed in the CDR database:
 - brand name and active ingredient;
 - CDR recommendation; and,
 - time in days from Notice of Compliance* to CDR issuing final recommendation.
- Nanos cross-referenced the drugs with provincial and territorial drug formularies to determine if the drugs were listed.

***Definition:** A Notice of Compliance is a notification, issued pursuant to paragraph C.08.004(1)(a), indicating that a manufacturer has complied with sections C.08.002 or C.08.003 and C.08.005.1 of the Food and Drug Regulations. Notices of Compliance are issued to a manufacturer following the satisfactory review of a submission by Health Canada.

Common Drug Review recommendations

It is estimated that the average number of days for CADTH Common Drug Review to issue a recommendation for coverage is 340 days. Although no drugs with an indication for Major Depressive Disorder (MDD) were recommended for listing on public formularies since the first submission for a drug with an indication for MDD in 2005, four of the six drugs assessed have are at least partially listed on provincial formularies.

Brand name	Active ingredient	CDR decision	Evaluation timeframe	BC	AB	SK	MB	ON	QC	PE	NB	NS	NL	NU	YK	NW
Abilify	Aripiprazole	Do not list***	511 days	■	■	■	■	■	■	■	■	■	■	■	■	■
Viibryd	Vilazodone	None*	-	■	■	■	■	■	■	■	■	■	■	■	■	■
Cipralext	Escitalopram oxalate	Do not list**	329 days	■	■	■	■	■	■	■	■	■	■	■	■	■
Trintellix	Vortioxetine	Under review	-	■	■	■	■	■	■	■	■	■	■	■	■	■
Cymbalta	Duloxetine hydrochloride	Do not list***	287 days	■	■	■	■	■	■	■	■	■	■	■	■	■
Pristiq	Desvenlafaxine succinate	Do not list****	231 days	■	■	■	■	■	■	■	■	■	■	■	■	■

*CADTH is unable to recommend reimbursement as a submission was not filed by the manufacturer.

**The initial submission for Cipralext filed in 2005 and withdrawn, then resubmitted. The evaluation timeframe is calculated as of the second NOC.

*** Abilify and Cymbalta are listed on all drug formularies; in the provinces marked in red it is not listed for a Major Depressive Disorder indication.

****Pristiq is listed on the British Columbia, Ontario, Nova Scotia and Newfoundland Labrador formulary, however, is it not covered by any benefit plans.

■ Drug is not listed

■ Drug is listed

Source:

¹CADTH. <https://www.cadth.ca/about-cadth/what-we-do/products-services/cdr/reports>.

²Provincial Formularies. For complete list please see bibliography.

Mandated generic substitution

- Nanos retrieved information on provincial policies for drug pricing and coverage.
- The majority of provinces have a policy of covering only the lowest-cost alternative or setting a maximum reimbursable price for medicines.
- All provinces also have a generic pricing policy, whereby the generic drug cost is set to a percentage of the brand name drug cost or is pegged to the cost of the drug in other provinces.
- N/A indicates that no data was found for that category.



Mandated generic substitution¹

Drug reimbursement policy information

BC	Low-Cost Alternative (LCA) Program: LCA prices are set at the maximum accepted list price for generic drugs in an LCA category, plus 8% (5% or less for drugs subject to the High-Cost Drugs Policy). When the same drug is made and sold by 2 or more manufacturers, PharmaCare covers the less-expensive version — the low-cost alternative.
AB	Least-cost alternative (LCA) price: The lowest unit cost established for a drug product within a set of interchangeable drug products. Beneficiaries who choose higher-cost alternatives are responsible for paying the difference in price.
SK	Low-cost alternative (LCA): Benefits are based on the lowest-priced interchangeable brand-name drug, as listed in the formulary.
MB	Lowest-cost pricing: Benefits are based on the lowest-priced interchangeable brand-name drug as listed in the formulary, whether or not the specified drug is prescribed with a “no sub” or “no substitution” instruction.
ON	Drug products are reimbursed at the listed Drug Benefit Price (DBP) (or lowest DBP for an interchangeable category) plus a markup, plus the lesser of a pharmacy’s posted usual and customary fee or the ODB dispensing fee, minus the applicable copayment amount.
QC ²	The public plan covers generics if they are less costly compared to their brand name version. Please note that you will have to pay the difference between the price of a brand name drug and an equivalent generic if you purchase the brand name drug. Certain exceptions apply.
NB ³	Drugs may be listed on the formulary based on the Manufacturer List Price. The maximum amount that the New Brunswick Drug Plans will reimburse for one unit (e.g. tablet, capsule, milliliter, gram, etc.) of a drug product in this category is the Manufacturer List Price (MLP) specified in the MLP List. Drugs may also be listed under a Maximum Allowable Price. The maximum amount that the New Brunswick Drug Plans will reimburse for one unit (e.g. tablet, capsule, milliliter, gram, etc.) of a drug product in this category (e.g. pharmaceutical equivalent, pharmaceutical alternative, interchangeable) is the Maximum Allowable Price (MAP) specified in the MAP List.
NS ⁴	The Pharmacare Programs pay the actual acquisition cost (AAC) or manufacturer's list price (MLP) for drugs submitted to the Pharmacare Programs, unless the drug has been assigned a Maximum Reimbursable Price (MRP) or a Pharmacare Reimbursement Price (PRP). The Pharmacare Programs also pay a markup on the cost plus a professional fee.
PE	Generic Drug Program: The beneficiary pays for each prescription out of pocket up to the program maximum cost of \$19.95 per prescription.
NL	Interchangeable unit price: The lowest unit price of all drugs within a Newfoundland and Labrador Interchangeable Drug Products Formulary category
YK	Lowest-cost alternative: Yukon Drug Programs formulary benefits will be based on the lowest-priced interchangeable brand available.
NW	N/A
NU	N/A

¹Canadian Institute for Health Information, *National Prescription Drug Utilization Information System. Plan Information Document*. July 31st, 2019.

²<http://www.ramq.gouv.qc.ca/en/citizens/prescription-drug-insurance/Pages/prescription-drugs-covered.aspx>

³<https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/ForHealthCareProfessionals/DrugPricingPolicy.html>

⁴ <https://novascotia.ca/dhw/pharmacare/benefits-and-reimbursement.asp>

Methodology for comparison of co-pay and deductible amounts

- Nanos retrieved information on co-pay and deductible amounts
- The data is presented based on rough income categories to allow comparability across provinces.
- Deductibles are a person's annual contribution towards drug costs. Plans will cover drug costs once the cost has been met.
- Co-payments are the contributions that individuals make to the cost of each prescription.
- Yearly maximums may apply in some provinces.
- Where restrictions apply or plan covers a special group, deductibles and co-pays listed are based on family income.
- Deductibles and co-pays may vary based on family size.
- All values reported are estimates for maximum coverage.
- Premiums, which are enrolment fees, apply for some provincial drug plans.
- N/A indicates that no data was found for that category.

Copayment comparison¹

	Net family income (<\$34000)	Net family income (\$34000-50000)	Net family income (>\$50000)
BC	After annual deductible has been met, 30% of the eligible prescription drug costs up to the annual maximum. No copayment for families with a net income up to \$13,750.		
AB	Seniors, Palliative and Non-Group drug plans: 30% copayment per prescription, to a maximum \$25. Possible exceptions to this maximum include if the drug is not listed on the Alberta Drug Benefit List; if a more expensive brand of drug than the least-cost alternative or generic product is requested; or if the brand of drug requested costs more than the maximum cost set by Alberta Health for that drug.		
SK	After deductible is met, 35% copayment; however, no copayment on benefits for children younger than age 18		
MB	None		
ON	Recipients pay up to \$2 for each prescription.		
QC	34.9% of the prescription cost minus the deductible, where applicable. No co-insurance for certain persons. See next slide for more information.		
NB	30% per prescription to a max. of \$5-\$10	30% per prescription to a max. of \$15	30% per prescription to a max. of \$20-\$30
NS	20% copayment per prescription, to an annual maximum based on a sliding scale (percentage of adjusted family income)		
PE	Family Health Benefit Drug Program: Professional fee for each prescription.		
NL	\$20.0%-35.5%	35.5%-70% (up to an income of \$42,870)	No coverage.
YK	None		
NW	N/A		
NU	N/A		

Source:

¹Canadian Institute for Health Information, *National Prescription Drug Utilization Information System. Plan Information Document.* July 31st, 2019.

Deductible comparison¹

	Net family income (<\$25000)	Net family income (\$25000-75000)	Net family income (>\$75000)
BC	0% (up to \$30,000)	2%-3% (as a percentage of net-income) above \$30,000	
AB	None. A premium of \$82.60/month applies to family (with children): income less than \$39,250.		
SK	Family Health Benefits: \$100 semi-annual family deductible Deductibles may be reduced if recipients are eligible for additional drug coverage through the Special Support Program.		
MB	≤4.72% Minimum deductible is \$100	4.79%-5.71% Minimum deductible is \$100	7.15% Minimum deductible is \$100
ON ²	For most people, the deductible for the Trillium Drug Program equals about 4% of the household income after taxes.		
QC	\$19.90 monthly deductible per person that must be paid through the first purchases of the month. A net family income–based premium applies, ranging from \$0 to \$616 per person, except for individuals with a valid claim slip, or those under 25 without a private plans (some other restrictions apply). Maximum beneficiary contribution: \$90.58 per month or \$1,087 per year.		
NB	None. Income-based premiums apply.		
NS ³	Up to \$130	\$130-\$5,985	<\$5,985
PE	None listed for the Family Health Benefit Drug Program.		
NL	None		
YK	Chronic Disease Program: \$250 per person per year. May be waived for palliative care recipients. May be waived or reduced depending on income. Children’s Drug and Optical Program: \$250 per child per year. May be waived or reduced depending on income.		
NW	N/A		
NU	N/A		

Source:

¹Canadian Institute for Health Information, *National Prescription Drug Utilization Information System. Plan Information Document*. July 31st, 2019.

²<https://www.ontario.ca/page/get-help-high-prescription-drug-costs>

³Government of Nova Scotia. <https://novascotia.ca/dhw/pharmacare/family-calculator.asp>

Methodology for comparison of provincial drug plan coverage

- Nanos compiled the data on groups covered by drug plans based on the information publicly available on government websites.
- Coverage descriptions were lifted verbatim.
- Coverage varies greatly across the country, however there are some emerging trends:
 - coverage is income dependant, with lower income families, receiving higher coverage at lower cost;
 - in most provinces coverage is limited to individuals who are not covered by a third party;
 - seniors and youth are the groups with the highest coverage, with a majority of provinces having programs targeting these specific groups;
 - refugees are covered under the Interim Federal Health Program;
 - Indigenous people are covered under the Non-Insured Health Benefits Program;
 - other federally managed health programs for special recipients include the Correctional Service of Canada Health Services, the Veterans Affairs Treatment Benefits, Canadian Forces Drug Benefit Plan, and RCMP Health Benefits Program.*
- N/A indicates that no data was found for that category

*<https://www.canada.ca/en/health-canada/services/health-care-system/pharmaceuticals/access-insurance-coverage-prescription-medicines/federal-public-drug-benefit-programs.html>

Provincial drug plan coverage for general public

General public

Fair PharmaCare helps B.C. families pay for eligible prescription drugs, dispensing fees and some medical supplies. To register for Fair PharmaCare, families must have Medical Services Plan (MSP) coverage. Fair PharmaCare is income-based; the less a family earns, the more help they get.

BC¹ All residents of B.C. are eligible for Fair PharmaCare coverage if they:

- Have Medical Services Plan (MSP) coverage, and
- Give PharmaCare permission to check their income with the Canada Revenue Agency. (Income is from two years prior.)

The Alberta Adult Health Benefit program covers health benefits for Albertans in low-income households who are pregnant or have high ongoing prescription drug needs. This health plan includes children who are 18 or 19 years old if they are living at home and attending high school.

Prescription drugs: Many prescription drugs are fully covered, Some over-the-counter products, such as prenatal vitamins for expectant mothers and children's vitamins are also provided.

Your family doctor or pharmacist has a list of what is covered under this health benefit plan. Coverage is summarized in the: Drug Benefit List and Drug Supplement List.

Maximum income guidelines based on family size

Family	Maximum income
Single adult	\$16,580
AB ² 1 adult + 1 child	\$26,023
1 adult + 2 children	\$31,010
1 adult + 3 children	\$36,325
1 adult + 4 children*	\$41,957
Couple, no children	\$23,212
Couple + 1 child	\$31,237
Couple + 2 children	\$36,634
Couple + 3 children	\$41,594
Couple + 4 children*	\$46,932

*For each additional child, add \$4,973

Those who already have health services paid for by other government programs are not eligible for the Alberta Adult Health Benefit.

Saskatchewan residents with valid Saskatchewan health coverage may be eligible for drug plan benefits. Costs of prescriptions vary depending on the type of benefits individuals receive. The Special Support Program is an income-tested program that helps residents with high drug costs in relation to their income.

SK³ Eligible applicants will receive a deductible and/or a co-payment on their prescription drugs for each calendar year.

Any individual or family may apply for this program. Families who receive the Guaranteed Income Supplement (GIS), Saskatchewan Income Plan (SIP) or Family Health Benefits may also apply for this program.

¹<https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover/fair-pharmacare-plan>

²<https://www.alberta.ca/alberta-adult-health-benefit.aspx>

³<https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/special-support-program>

Provincial drug plan coverage for general public

General public

MB¹ Pharmacare provides drug cost assistance to eligible Manitobans who do not have coverage under a federal or other provincial program. Pharmacare is income based, which means a 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 per cent of eligible prescription costs for the remainder of the benefit year.

The Trillium Drug Program helps Ontarians pay for their high prescription-drug costs.

You should apply if you:

- live in Ontario
- ON² • have a valid Ontario health card number
- do not already qualify for the Ontario Drug Benefit program (for example, you are not enrolled in a program such as Ontario Works)
- do not have an insurance plan that pays for 100% of your drugs
- spend about 4% or more of your after-tax household income on prescription-drug costs.

QC³ 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.

Adults (age 18 to 64) may use this service if they are: single, living with a spouse (without children), living with a spouse and children (they must be the biological or adoptive children of the couple), or the head of a single-parent family.

The New Brunswick Drug Plan is available to New Brunswick residents who have an active Medicare card and meet one of the following: Do not have drug coverage through a private plan or other government program, or have existing drug coverage with a private plan, however:

- They have reached the annual or lifetime maximum for drug coverage with the plan, or
- NB⁴ • They have been prescribed a drug that is not listed on their private plan formulary for the prescribed condition (indication).*

*Contact the New Brunswick Drug Plan Information Line toll free at 1-855-540-7325 prior to applying to confirm that the requested drug is included in the New Brunswick Drug Plan Formulary.

¹<https://www.gov.mb.ca/health/pharmacare/general.html>

²<https://www.ontario.ca/page/get-help-high-prescription-drug-costs>

³http://www.ramq.gouv.qc.ca/en/citizens/Pages/online_registration_deregistration.aspx

⁴<https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/Enrol.html>

Provincial drug plan coverage for general public

General public

	<p>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. The Program is available to all Nova Scotians with a valid Nova Scotia Health Card.</p> <p>To be eligible for the Family Pharmacare Program, you must:</p> <ul style="list-style-type: none">- Be a resident of Nova Scotia with a valid Nova Scotia Health Card- Agree to family income verification through Canada Revenue Agency each year- Agree to provide family size information each year <p>A resident who meets these criteria is not eligible for benefits under the Family Pharmacare Program if they are receiving drug coverage through the:</p> <ul style="list-style-type: none">- Nova Scotia Seniors' Pharmacare Program,- Nova Scotia Diabetes Assistance Program,- Under 65-Long Term Care Pharmacare Plan, or- Any Nova Scotia Department of Community Services Pharmacare Benefits
NS ¹	<p>The Prince Edward Island Generic Drug Program is for Islanders under the age of 65 who do not have insurance. The program limits out-of-pocket costs for eligible generic prescription drugs to a maximum cost of \$19.95. Coverage is income dependent.</p> <p>You are eligible for the program if you:</p> <ul style="list-style-type: none">-have no private drug insurance coverage;-under 65 years of age;-hold a valid PEI Health Card; and-have completed an application and have been approved for coverage.
PE ²	<p>The Access Plan 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>The Assurance Plan 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 \$40,0007.5% of net income for those who earn from \$40,000 to under \$75,00010% 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.</p>
NL ³	
YK	N/A.
NW ⁴	Extended Health Benefits coverage is available for Special Conditions. Mental Health coverage is limited to Chronic Psychosis as part of a broader group of conditions.
NU ⁵	Extended Health Benefits coverage is available for Special Conditions. Mental Health coverage is limited to Chronic Psychosis as part of a broader group of conditions.

¹<https://novascotia.ca/dhw/pharmacare/family-pharmacare.asp>

²<https://www.princeedwardisland.ca/en/service/apply-for-the-generic-drug-program>

³https://www.health.gov.nl.ca/health/prescription/nlpdf_plan_overview.html

⁴<https://www.hss.gov.nt.ca/en/services/applying-extended-health-benefits-specified-disease-conditions-program>

⁵<https://gov.nu.ca/health/information/extended-health-benefits-ehb-eligible-specified-conditions>

Provincial drug plan coverage for seniors

Seniors

BC¹ No specific program exists. (Covered by Fair Pharmacare)

To be eligible for Coverage for Seniors, you must provide proof of being 65 years of age or older.

AB² When AHCIP records indicate an Albertan will be turning 65, a package is mailed to the address on their AHCIP file providing information about programs and services for seniors.

Your eligibility is determined by age and the income reported on your income tax return filed with the Canada Revenue Agency. You must:

- Be a Saskatchewan resident 65 years of age or older with a valid Saskatchewan Health card.
- Be eligible for the provincial age credit, which is based on the annual net income you reported on Line 236 of your income tax form in the previous year.
- Seniors who are covered under federal government programs, such as the federal Non-Insured Health Benefits Program or Veterans Affairs are not eligible for the Seniors' Drug Plan.

SK³ If you already pay less than \$25 per prescription, you will continue to do so. For example, if your medication is \$25 per prescription under the Seniors' Drug Plan, but \$11 under the Special Support program, you will continue to pay \$11 for that prescription.

There will be no change in coverage for those seniors who have drug coverage under:

- Saskatchewan Aids to Independent Living (SAIL);
- Palliative care programs.

¹<https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/about-pharmacare>

²<https://www.alberta.ca/alberta-seniors-benefit.aspx>

³<https://www.saskatchewan.ca/residents/health/accessing-health-care-services/seniors-drug-plan>

Provincial drug plan coverage for seniors

Seniors

MB¹ No specific program exists. (Covered by the Manitoba Pharmacare Program)

Low-income Seniors Co-Payment program under the Ontario Drug Benefit (ODB) Program

ON² You might be eligible to enrol in the Seniors Co-Payment Program if you are:

- A single senior with an income of less than or equal to \$19,300; or
- A senior couple with a combined income of less than or equal to \$32,300.

QC³ No specific program exists. (Covered by the Public Drug Insurance Program)

New Brunswick seniors are eligible to apply for drug coverage if they:

NB⁴

- are age 65 years of age or older
- are a permanent resident of New Brunswick
- have a valid NB Medicare card
- do not have prescription drug coverage from another plan

Coverage will remain in effect as long as the beneficiary continues to meet the eligibility requirements.

The Seniors' Pharmacare Program pays for drugs and some supplies, which are indicated as benefits in the Nova Scotia Formulary.

To be eligible for benefits under the Program, an individual must:

NS⁵

- Be a resident of Nova Scotia,
- Be age sixty-five (65) years and over,
- Have a valid Nova Scotia Health Card, and
- Not have prescription drug coverage under any other plan or program.

¹<https://www.gov.mb.ca/health/pharmacare/index.html>

²<http://www.health.gov.on.ca/en/public/programs/drugs/programs/copayment/copayment.aspx>

³<http://www4.gouv.qc.ca/EN/Portail/Citoyens/Evenements/aines/Pages/inscription-regime-public-medicaments.aspx>

⁴https://www2.gnb.ca/content/gnb/en/services/services_renderer.8875.New_Brunswick_Drug_Plans_for_Seniors.html

⁵<https://novascotia.ca/dhw/pharmacare/seniors-pharmacare.asp>

Provincial drug plan coverage for seniors

Seniors

- If you are age 65 or older, you are eligible for coverage of the cost of approved medications through the Seniors' Drug Program.
- PE¹ You are eligible for the program if you:
- have a PEI Health Card; and
 - are age 65 or older.
- NL² The 65Plus Plan: The plan 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). Beneficiaries will be responsible for payment of the dispensing fee up to a maximum of \$6.
- YK³ The Pharmacare and Extended Health Benefits programs: To be eligible for benefits you must be registered with the Yukon Health Care Insurance Plan (YHCIP). You must be a Yukon resident at least 65 years of age or aged 60 and married to a living Yukon resident who is at least 65 years of age.
- NW⁴ Extended Health Benefits for Seniors Program
Who can apply for Extended Health Benefits (EHB)?
60 years of age or over
Métis or Non-Indigenous
Permanent resident of the Northwest Territories (NWT)
Have a valid NWT Health Care Card
- All non-indigenous Nunavut residents, enrolled in the Nunavut Health Care Plan, 65 years of age or older may be eligible for Extended Health Benefits (EHB) coverage.
- A person registered for the Seniors' Coverage may be entitled to:
- NU⁵
- Cost of prescription drugs listed on the formulary, including exception drugs
 - Cost of ambulatory charges for transportation within Nunavut
 - \$1,000 combined cost of dental care per calendar year
 - Medically required audiology services and products
 - Full cost of prescribed medical supplies and appliances, their fitting and shipping
 - Vision care services and products

¹<https://www.princeedwardisland.ca/en/information/sante-i-p-e/seniors-drug-program>

²https://www.health.gov.nl.ca/health/prescription/nlpdp_plan_overview.html

³<http://www.hss.gov.yk.ca/pharmacare.php>

⁴<https://www.hss.gov.nt.ca/en/services/applying-extended-health-benefits-seniors-program>

⁵<https://www.gov.nu.ca/health/information/extended-health-benefits-ehb-seniors-coverage>

Provincial drug plan coverage for youth

Youth

BC¹ Covered under family plan until age 19, then eligible for single person family plan.

AB² Covered under the plan until age 18, 18 and 19 year-olds covered if still living at home and attending high school.

SK³ In Saskatchewan, families pay a maximum of \$25 for prescription drugs if their children are 14 and under. Must not have federal coverage.

MB No specific program exists.

ON⁴ 24 years of age or younger and not covered by a private insurance plan.

QC No specific program exists.

NB No specific program exists.

¹<https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover>

²<https://www.alberta.ca/alberta-child-health-benefit.aspx>

³<https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/childrens-drug-plan>

⁴https://www.ontario.ca/page/learn-about-ohip-plus?_ga=2.193409069.1078249720.1568128015-1448354165.1565970631

Provincial drug plan coverage for youth

Youth

NS	No specific program exists. Children in Care Drug Program
PE ¹	The cost of approved prescription and non-prescription medications are covered for children under temporary or permanent care of the Director of Child Protection.
NL	No specific program exists. Eligibility <ul style="list-style-type: none">• Low-income families with children ages 0 to 18 years are eligible.• If the family has other insurance, that insurance must be used first.
YK ²	<ul style="list-style-type: none">• A benefit card will be issued for each eligible child.• The card will be effective from the date of enrolment to March 31 of the same fiscal year.• Families must reapply each fiscal year.• The benefit card must be presented to the pharmacists or optometrist and the program will be billed for services provided.
NW	No specific program exists.
NU	No specific program exists.

¹<https://www..ca/en/information/health-pe/children-care-drug-program>

²<http://www.hprinceedwardislandss.gov.yk.ca/childdrugoptical.php>

Provincial drug plan coverage for refugees

Refugees

BC Covered by IFHP (FEDERAL).

AB¹ Refugee or refugee claimant who is not receiving health benefits from any other source though AAHB

SK Covered by IFHP (FEDERAL).

MB Covered by IFHP (FEDERAL).

ON Covered by IFHP (FEDERAL).

QC Covered by IFHP (FEDERAL).

NB Covered by IFHP (FEDERAL).

NS Covered by IFHP (FEDERAL).

PE Covered by IFHP (FEDERAL).

NL Covered by IFHP (FEDERAL).

YK Covered by IFHP (FEDERAL).

NW Covered by IFHP (FEDERAL).

NU Covered by IFHP (FEDERAL).

¹<https://www.alberta.ca/alberta-adult-health-benefit.aspx>

<https://www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program/coverage-summary.html>

Provincial drug plan coverage for immigrants

Immigrants

BC No specific program.

If you have an immigration document from Immigration, Refugee and Citizenship Canada, you might be eligible for AHCIP coverage. Your eligibility depends on:

- the type of entry document you have
- AB¹ • any restrictions listed on the document
- the length of time allowed in Canada
- your commitment to live in Alberta for 12 consecutive months
- A Canada Travel Visa is not an accepted document.

SK No specific program.

MB No specific program.

ON No specific program.

QC No specific program.

NB No specific program.

NS No specific program.

PE No specific program.

NL No specific program.

YK No specific program.

NW No specific program.

NU No specific program.

¹<https://www.alberta.ca/ahcip-moving-to-alberta.aspx>

Provincial drug plan coverage for people receiving disability payments

People receiving disability payments

BC No specific program.

AB No specific program.

SK No specific program.

MB No specific program.

ON No specific program.

QC No specific program.

NB No specific program.

NS No specific program.

PE No specific program.

NL No specific program.

YK No specific program.

NW No specific program.

NU No specific program.

Provincial drug plan coverage for people receiving social assistance

People receiving social assistance

Recipients of B.C. Income Assistance (Plan C)

This plan provides 100% coverage of eligible prescription costs for B.C. residents receiving benefits and income assistance through the Ministry of Social Development and Poverty Reduction. The Ministry of Social Development and Poverty Reduction sends eligibility information to PharmaCare on their clients' behalf—you do not need to apply to PharmaCare for this coverage.

For more information on these benefits, contact your local office of the Ministry of Social Development and Poverty Reduction.

AB² Health benefits covered under Income support program.

SK³ Residents qualifying for the federal Guaranteed Income Supplements (GIS) and the Seniors' Income Plan (SIP) in Saskatchewan also receive health benefits.

MB No specific program.

ON⁴ Receiving benefits from Ontario Works.

QC No specific program.

NB No specific program.

NS No specific program.

PE No specific program.

NL⁵ The Foundation Plan 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.

YK No specific program.

NW No specific program.

NU No specific program.

¹<https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover>

²<https://www.alberta.ca/income-support-what-you-get.aspx>

³<https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/income-supplements>

⁴https://www.mcass.gov.on.ca/en/mcass/programs/social/ow/help/benefits/health_Benefits.aspx

⁵https://www.health.gov.nl.ca/health/prescription/nlpdp_plan_overview.html

Indigenous people

First Nations Health Benefits (Plan W)

You are eligible for coverage under the Plan W if you:

have active Medical Services Plan (MSP) coverage, and

are a registered Indian under the Indian Act, or are a child of less than 1 year of age who has at least one parent who is a registered Indian under the Indian Act, and

BC¹ are not an individual who is eligible to receive comprehensive drug coverage through:

- a treaty and land claims agreement under the Constitution Act, 1982 (Canada) (unless that treaty and land claims agreement has been identified by the provincial Minister of Health as not resulting in ineligibility), or
- a written contribution arrangement between a First Nations organization and a government or province of Canada under which the government provides funding and which has been identified by the provincial Minister of Health as resulting in ineligibility for enrolment.

Your eligibility for the plan is confirmed by the FNHA; PharmaCare cannot authorize coverage under Plan W.

AB No specific program. Non-Insured Health Benefits Program (FEDERAL)

SK No specific program. Non-Insured Health Benefits Program (FEDERAL)

MB No specific program. Non-Insured Health Benefits Program (FEDERAL)

ON No specific program. Non-Insured Health Benefits Program (FEDERAL)

¹<https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover/first-nations-health-authority-clients>
<https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/who-is-eligible-non-insured-health-benefits-program.html>

Provincial drug plan coverage for Indigenous people

Indigenous people

Certain permanent Québec residents cannot obtain coverage under the public plan or a private plan because they are insured under another statute or program:

QC¹

Beneficiaries of the James Bay and Northern Quebec Agreement (Cree and Inuit) and the Northeastern Quebec Agreement (Naskapi) Indians registered with Crown-Indigenous Relations and Northern Affairs Canada and Inuit recognized by this ministry.

NB No specific program. Non-Insured Health Benefits Program (FEDERAL)

NS No specific program. Non-Insured Health Benefits Program (FEDERAL)

PE No specific program. Non-Insured Health Benefits Program (FEDERAL)

NL No specific program. Non-Insured Health Benefits Program (FEDERAL)

YK No specific program. Non-Insured Health Benefits Program (FEDERAL)

NW² The Government of the Northwest Territories (GNWT) sponsors the Métis Health Benefits program to provide registered Indigenous Métis residents of the Northwest Territories access to a range of benefits not covered by hospital and medical care insurance. This program provides you with 100 percent coverage for eligible prescription drug products as defined in Indigenous Services Canada's Non-Insured Health Benefit (NIHB) Drug Benefit List when the drug is prescribed by a recognized health care professional and dispensed by a licensed pharmacist.

If a drug that has been prescribed for you is not on Indigenous Services Canada's NIHB Drug Benefit List, your health care professional or pharmacist may submit a request to Alberta Blue Cross on your behalf for prior authorization.

NU No specific program. Non-Insured Health Benefits Program (FEDERAL)

¹<http://www.ramq.gouv.qc.ca/en/citizens/prescription-drug-insurance/Pages/eligibility.aspx>

²<https://www.hss.gov.nt.ca/en/services/supplementary-health-benefits/metis-health-benefits>

<https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/who-is-eligible-non-insured-health-benefits-program.html>



Common Drug Review recommendations:

CADTH. Common Drug Review. <https://www.cadth.ca/about-cadth/what-we-do/products-services/cdr/reports>

Mandated generic substitutions:

CIHI. National Prescription Drug Utilization Information System. <https://secure.cihi.ca/estore/productSeries.htm?pc=PCC294>

Quebec. Prescription drug insurance. <http://www.ramq.gouv.qc.ca/en/citizens/prescription-drug-insurance/Pages/prescription-drugs-covered.aspx>

New Brunswick. Drug Price Lists and Pricing Policies

<https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/ForHealthCareProfessionals/DrugPricingPolicy.html>

Nova Scotia. Benefits and Reimbursement. <https://novascotia.ca/dhw/pharmacare/benefits-and-reimbursement.asp>

Provincial formularies:

British Columbia. <https://pharmacareformularysearch.gov.bc.ca/faces/Search.xhtml>

Alberta. <https://www.ab.bluecross.ca/dbl/publications.php>

Saskatchewan. <http://formulary.drugplan.ehealthsask.ca/SearchFormulary>

Manitoba. <https://www.gov.mb.ca/health/mdbif/index.html>

Ontario. http://www.health.gov.on.ca/en/pro/programs/drugs/odbf_eformulary.aspx

Quebec. <http://www.ramq.gouv.qc.ca/en/publications/citizens/legal-publications/Pages/list-medications.aspx>

New Brunswick.

<https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/ForHealthCareProfessionals/DrugPricingPolicy.html>

Nova Scotia. <https://novascotia.ca/dhw/pharmacare/formulary.asp>

Prince Edward Island. <https://src.healthpei.ca/resources-pharmacists>

Newfoundland and Labrador. <https://www.health.gov.nl.ca/health/nlpdp/fmlsearch.asp>

Yukon. <http://apps.gov.yk.ca/drugs/f?p=161:9000:1091334616759018>

Medication descriptions:

Amitriptyline. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3633&query=AMITRIPTYLINE>

Aripiprazole. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3973&query=Aripiprazole>

Citalopram. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=2682&query=Citalopram>

Clomipramine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=2669&query=Clomipramine>

Desipramine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=2&query=Desipramine>

Desvenlafaxine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=1849&query=APO-DESVENLAFAXINE>

Duloxetine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=259&query=DULOXETINE>

Escitalopram. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3012&query=escitalopram>

Fluoxetine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3758&query=FLUOXETINE>

Fluvoxamine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=4123&query=fluvoxamine>

Imipramine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=347&query=imipramine>

Mirtazapine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3142&query=mirtazapine>

Moclobemide. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=2980&query=MOCLOBEMIDE>

Nardil. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3401&query=NARDIL>

Nortriptyline. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=1011&query=nortriptyline>

Sertraline. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=179&query=sertraline>

Parnate. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3729&query=PARNATE>

Medication descriptions:

Paroxetine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=3000&query=PAROXETINE>

Quetiapine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=565&query=quetiapine>

Trazodone. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=4420&query=trazodone>

Trimipramine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=2922&query=TRIMIPRAMINE>

Venlafaxine. Health Canada. <https://hpr-rps.hres.ca/details.php?drugproductid=1277&query=venlafaxine>

Copayments and deductibles

CIHI. National Prescription Drug Utilization Information System. <https://secure.cihi.ca/estore/productSeries.htm?pc=PCC294>

Government of Ontario. A Guide to Understanding the Trillium Drug Program. 2013.

Government of Nova Scotia. <https://novascotia.ca/dhw/pharmacare/family-calculator.asp>

Provincial drug plan coverage:

Government of Canada. Federal Public Drug Benefit Programs. <https://www.canada.ca/en/health-canada/services/health-care-system/pharmaceuticals/access-insurance-coverage-prescription-medicines/federal-public-drug-benefit-programs.html>

British Columbia. Fair PharmaCare Plan. <https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover/fair-pharmacare-plan>

Alberta. Health Benefit Program. <https://www.alberta.ca/alberta-adult-health-benefit.aspx>

Saskatchewan. Drug cost assistance. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/special-support-program>

Manitoba. Pharmacare Program. <https://www.gov.mb.ca/health/pharmacare/general.html>

Ontario. Trillium Drug Program. <https://www.ontario.ca/page/get-help-high-prescription-drug-costs>

Quebec. Public Prescription Drug Insurance Plan.
http://www.ramq.gouv.qc.ca/en/citizens/Pages/online_registration_deregistration.aspx

New Brunswick. New Brunswick Drug Plan.
<https://www2.gnb.ca/content/gnb/en/departments/health/MedicarePrescriptionDrugPlan/NBDrugPlan/Enrol.html>

Nova Scotia. Family Pharmacare Program. <https://novascotia.ca/dhw/pharmacare/family-pharmacare.asp>

PEI. Generic Drug Program. <https://www.princeedwardisland.ca/en/service/apply-for-the-generic-drug-program>

Newfoundland. Assurance Plan. https://www.health.gov.nl.ca/health/prescription/nlpdp_plan_overview.html

Northwest Territories. Extended Health Benefits. <https://www.hss.gov.nt.ca/en/services/applying-extended-health-benefits-specified-disease-conditions-program>

Nunavut. Extended Health Benefits. <https://gov.nu.ca/health/information/extended-health-benefits-ehb-eligible-specified-conditions>

Seniors provincial drug coverage:

British Columbia. Fair Pharmacare <https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/about-pharmacare>

Alberta. Alberta Health care Insurance Plan. <https://www.alberta.ca/seniors-health-benefits.aspx>

Saskatchewan. Seniors' Drug Plan. <https://www.saskatchewan.ca/residents/health/accessing-health-care-services/seniors-drug-plan>

Manitoba. Manitoba Pharmacare Program. <https://www.gov.mb.ca/health/pharmacare/index.html>

Ontario. Low-income Seniors Co-payment program.

<http://www.health.gov.on.ca/en/public/programs/drugs/programs/copayment/copayment.aspx>

Quebec. Public Drug Insurance Plan. <http://www4.gouv.qc.ca/EN/Portail/Citoyens/Evenements/aines/Pages/inscription-regime-public-medicaments.aspx>

New Brunswick. Drug Plans for Seniors.

https://www2.gnb.ca/content/gnb/en/services/services_renderer.8875.New_Brunswick_Drug_Plans_for_Seniors.html

Nova Scotia. Seniors Pharmacare Program. <https://novascotia.ca/dhw/pharmacare/seniors-pharmacare.asp>

PEI. Seniors' Drug Program. <https://www.princeedwardisland.ca/en/information/sante-i-p-e/seniors-drug-program>

Newfoundland. The 65Plus Plan. https://www.health.gov.nl.ca/health/prescription/nlpdp_plan_overview.html#2

Yukon. Pharmacare and Extended Health Benefits Programs. <http://www.hss.gov.yk.ca/pharmacare.php>

Northwest Territories. Extended Health Benefits. <https://www.hss.gov.nt.ca/en/services/applying-extended-health-benefits-seniors-program>

Nunavut. Extended Health Benefits. <https://www.gov.nu.ca/health/information/extended-health-benefits-ehb-seniors-coverage>

Youth provincial drug coverage:

British Columbia. Fair Pharmacare. <https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover>

Alberta. Alberta Child Health Benefit. <https://www.alberta.ca/alberta-child-health-benefit.aspx>

Saskatchewan. Children's Drug Plan. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/childrens-drug-plan>

Manitoba. Manitoba Pharmacare Program.

Ontario. OHIP+. https://www.ontario.ca/page/learn-about-ohip-plus?_ga=2.193409069.1078249720.1568128015-1448354165.1565970631

PEI. Children in Care Drug Program. <https://www.princeedwardisland.ca/en/information/health-pe/children-care-drug-program>

Yukon. Children's drug and optical program. <http://www.hss.gov.yk.ca/childdrugoptical.php>

Provincial drug plan coverage for refugees:

Canada. Interim Federal Health Program. <https://www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program/coverage-summary.html>

Alberta. Alberta Adult Health Benefit. <https://www.alberta.ca/alberta-adult-health-benefit.aspx>

Provincial drug plan coverage for immigrants:

Alberta. Alberta Health Care Insurance Plan. <https://www.alberta.ca/ahcip-moving-to-alberta.aspx>

Provincial drug plan coverage for people receiving social assistance:

British Columbia. Fair Pharmacare (Plan C). <https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover>

Alberta. Income Support Program. <https://www.alberta.ca/income-support-what-you-get.aspx>

Saskatchewan. Income Supplements. <https://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage/extended-benefits-and-drug-plan/income-supplements>

Ontario. Ontario Works. https://www.mcsc.gov.on.ca/en/mcsc/programs/social/ow/help/benefits/health_Benefits.aspx

Newfoundland. The Foundation Plan. https://www.health.gov.nl.ca/health/prescription/nlpdp_plan_overview.html

Provincial drug plan coverage for Indigenous people:

Canada. Non-Insured Health Benefits Program. <https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/who-is-eligible-non-insured-health-benefits-program.html>

British Columbia. First Nations Health Benefits (Plan W). <https://www2.gov.bc.ca/gov/content/health/health-drug-coverage/pharmacare-for-bc-residents/who-we-cover/first-nations-health-authority-clients>

Quebec. <http://www.ramq.gouv.qc.ca/en/citizens/prescription-drug-insurance/Pages/eligibility.aspx>

Northwest Territories. Métis Health Benefits Program. <https://www.hss.gov.nt.ca/en/services/supplementary-health-benefits/metis-health-benefits>