

Alberta Provincial Health Plan

Fact Sheet

Your Alberta Health Care Insurance Plan provides:

Prescription Drugs

- Premium-free coverage for seniors age 65 and over; residents under age 65 who enroll pay quarterly premiums. Eligible residents pay 30 per cent of the cost of prescription drugs, up to a \$25 maximum per prescription or refill. Maximum is not applicable when a product is chosen over the lowest cost alternative - patient pays the difference. Only prescription drugs listed in the Alberta Health and Wellness Drug Benefit list are covered.
- The Alberta government sets a maximum cost of reimbursement for dispensing fees based on the ingredient cost.

	Dispensing fee	Additional inventory allowance
Ingredient cost, up to \$74.99	\$10.22	\$0.71
Ingredient cost, \$75.00 - \$149.00	\$15.53	\$2.00
Ingredient cost, \$150.00 and more	\$20.94	\$5.03

Ambulance

No coverage for ground ambulance services, with the following exceptions:

- Limited coverage for seniors and widows through Alberta Blue Cross
 - Hospital-to-hospital transfers as provided through Regional Health Authorities.
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Dental benefits

- No coverage for routine dental care such as cleaning, fillings and the extraction of wisdom teeth.
 - Coverage for some specific dental and oral and maxillofacial surgical services performed by a dentist.
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Visioncare

- No coverage for routine eye exams for residents ages 19 to 64.
 - Coverage for one complete eye exam, one partial exam and one diagnostic procedure per benefit year for residents age 18 and under or age 65 and older.
 - Coverage for diagnosis and treatment of eye disease and injuries.
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Nursing Benefits and Home Care

- Some coverage for residents of continuing care centres (nursing homes and auxiliary hospitals) for those that qualify.
 - Some coverage for home care services to assist independent living are provided based on the assessed needs of the client.
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Hearing Aids and Medical Supplies

Limited coverage under the Alberta Aids to Daily Living Program for disabled, chronically ill or terminally ill claimants.

Accidental Death & Dismemberment	No coverage
Hospital	Coverage for standard ward rooms only.
Paramedicals	<ul style="list-style-type: none"> • No coverage for services provided by an acupuncturist, licensed massage therapist, midwife, homeopath, social worker or nutritionist. • Coverage for chiropractic visits and x-rays are payable at specific rates per service to a maximum of \$200 per person, per yearly benefit period. • Coverage for some physiotherapy services through the Community Rehabilitation Program administered by the Regional Health Authorities. Persons are assessed according to need and assigned a priority rating using a scale of 3 to 15. Those assigned a priority of seven or higher are eligible for services through the program. • Coverage for some podiatric services and appliances are payable at specific rates per service to a maximum of \$250 per person, per benefit year. • Coverage for medically required services provided by osteopaths covered under an approved schedule of fees. • Private insurers are not allowed to pay benefits for services provided by some paramedical practitioners until the government's yearly benefit maximum has been reached.
Out of Country	<ul style="list-style-type: none"> • No coverage for air or ground ambulance outside of Alberta. • Coverage for the services of physicians out of Canada, up to Alberta rates only. • Coverage of up to \$100 per day, not including the day of discharge, for in-patient hospital services outside Canada. • Coverage for routine hospital outpatient services to a maximum of \$50 (Canadian) per visit with a limit of one visit per day.

These highlights from the Alberta Health Care Insurance Plan are for general reference only and are subject to change, corrections and updates. Other government programs may also be available. For more information on the latest coverage details, please contact Alberta Health and Wellness at:

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