Prescription Drugs

- Some coverage for seniors through Alberta Blue Cross. Eligible seniors pay 30% of the cost of prescription drugs, up to a $25 maximum per prescription or refill. Residents under age 65 can join the Alberta Blue Cross Non-Group Plan by paying premiums. Only prescription drugs listed in the Alberta Health and Wellness Drug Benefit List are covered.

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.

Dental Benefits

- **NO COVERAGE** for routine dental care.
- Coverage for specified oral surgical procedures performed by dental surgeons.
- Limited dental coverage, under the Extended Health Benefits (EHB) Program, for claimants ages 65 and older, as well as recipients of the Alberta Widows’ Pension, including a spouse and eligible dependants.

Visioncare

- **NO COVERAGE** for routine eye exams for residents ages 19 to 64.
- Coverage for one routine eye exam annually for residents ages 18 and under or 65 and older.
- Coverage for diagnosis and treatment of eye disease and injuries.
- Limited coverage for glasses, under the EHB Program, for claimants ages 65 or older or who are recipients of the Alberta Widows’ Pension, including a spouse and eligible dependants.
Hospital

- Coverage for standard ward rooms only.

Nursing Benefits and Home Care

- Some coverage for residents of continuing care centres (nursing homes and auxiliary hospitals).
  Residents are responsible for paying accommodation charges ranging from $24.75 to $28.60 per day.
- Some coverage for home care services to assist independent living for eligible persons.

Paramedicals

- **NO COVERAGE** for Services provided by massage therapists or naturopaths.
- Chiropractic coverage equalling $12.66 per visit and $20.95 per X-ray, 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 7 or higher are eligible for services through the program.
- Coverage for podiatric services and appliances, paid for under an approved schedule of fees with a yearly benefit period limit of $250 per person.
- 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.

Hearing Aids and Medical Supplies

- Limited coverage under the Alberta Aids to Daily Living Program for disabled, chronically ill or terminally ill claimants. Eligible residents pay 25% of the cost of benefits to a maximum of $500 per family, per benefit year.

Accidental Death and Dismemberment

- **NO COVERAGE.**

Out of Country

- **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 for in-patient hospital services outside Canada.