Seniors’ Drug Plan

General Questions and Answers

What are the changes to the Seniors’ Drug Plan?
- Effective midnight March 21, 2012, the cost of a prescription will increase from $15 to $20.

Do seniors who are already on the Seniors’ Drug Plan have to re-apply for the Seniors’ Drug Plan?
- No, seniors who have already applied and are eligible for the Seniors’ Drug Plan will not have to re-apply for the program.

Has the application process changed?
- The process to apply for the Seniors’ Drug Plan has not changed.

Do I need a special card redeem my Seniors’ Drug Plan benefits?
- No, your pharmacist will know through the Drug Plan computer system that you are eligible for the Seniors’ Drug Plan.

What kinds of benefits are covered under the Seniors Drug Plan?
- Eligible seniors will pay $20 per prescription for drugs listed in the Saskatchewan Formulary or those approved under Exception Drug Status.
- Maximum Allowable Cost and Low Cost Alternative policies continue to apply.

Who is eligible for the Seniors’ Drug Plan?
- You must be a Saskatchewan resident with a valid health card.
- You must be at least 65 years of age.
- You must have a net income (Line 236 of your income tax return) that is less than $80,256 in 2013.
**Please note that the Seniors’ Drug Plan does not include seniors who are covered under federal government programs, such as the federal Non-Insured Health Benefits Program or Veterans Affairs.
I am currently not on the Seniors’ Drug Plan. How do I apply for the Seniors’ Drug Plan?

- If you have questions about the application, please review the questions and answers on the application process.

If I am eligible for coverage, will my spouse be covered too?

- Seniors’ Drug Plan eligibility is based on your individual income. Each senior in your household who meets the eligibility requirements must apply for coverage separately.
- There may be situations where one spouse will qualify and the other spouse will not qualify, based on age or income.

When will my coverage begin?

- You can apply for the Seniors’ Drug Plan coverage at any time:
  - If you apply before your 65th birthday, your coverage begins the first day of the month that you turn 65.
  - If you apply after your 65th birthday, your coverage begins as soon as your application is processed.
  - You will receive a letter in the mail to inform you if you are or are not approved for coverage.

How is the income test value determined?

- This income test value is based on your eligibility for the Federal Age Tax Credit.
- If you have questions about the application, please review the questions and answers on the application process.

I don’t think I am eligible for coverage under the Seniors’ Drug Program but my drug costs are still high. Can I still get assistance with my drug costs?

- The Special Support Program is designed to assist those with high drug costs in relation to their income.
- If you have questions about the Special Support Program, contact the Drug Plan toll free at 1-800-667-7581 or in Regina at 787-3317.

What does this mean if I already receive drug coverage based on Guaranteed Income Supplement (GIS)?

- For drugs covered by the Saskatchewan Formulary and approved under Exception Drug Status, you will pay the lesser of the GIS drug plan coverage or Seniors’ Drug Plan coverage.
For example, if your prescription would cost $20 under the Seniors’ Drug Plan, but only $9 under GIS coverage, you will continue to pay $9 for that prescription.

What does this mean if I already receive drug coverage based on Saskatchewan Income Plan (SIP)?

- For drugs covered by the Saskatchewan Formulary and approved under Exception Drug Status, you will pay the lesser of the SIP drug plan coverage or Seniors’ Drug Plan coverage.
- For example, if your prescription would cost $20 under the Seniors’ Drug Plan, but only $9 under SIP coverage, you will continue to pay $9 for that prescription.

Does the Seniors’ Drug Plan affect my Special Support coverage?

- For drugs covered by the Saskatchewan Formulary and approved under Exception Drug Status, you will pay the lesser of the Special Support coverage or Seniors’ Drug Plan coverage.
- For example, if your prescription would cost $20 under the Seniors’ Drug Plan, but only $9 under the Special Support Program, you will continue to pay $9 for that prescription.

What does this mean if I have drug coverage under Palliative Care or Saskatchewan Aids to Independent Living (SAIL)?

- Coverage under Palliative Care and SAIL programs (paraplegia, cystic fibrosis, and end stage renal disease programs) provides benefit drugs at no cost.
- You will continue to pay no cost for benefit prescriptions.

Why doesn’t the Seniors’ Drug Plan cover more extended benefits such as dental, optical, or medical supplies?

- At this time, only prescription drugs listed in the Saskatchewan Formulary or those approved under Exception Drug Status are covered under the Seniors’ Drug Plan.

I take many over-the-counter and herbal products. Are they covered under the Seniors’ Drug Plan?

- No. Only prescription drugs listed in the Saskatchewan Formulary or those approved under Exception Drug Status are eligible for coverage.

TheSeniors’ Drug Plan still covers formulary drugs only, but most of my medications are not on the formulary. How does this program benefit me?

- If your medication is not listed on the formulary, you will pay the full cost.
Some medications may be covered under Exception Drug Status if certain medical criteria are met.

Talk to your physician or pharmacist to see if your medication is eligible for Exception Drug Status. If your medication is approved for coverage, the cost of a prescription will be $20.

**Could I get a twelve-month’s supply of prescriptions for $20?**

- Talk to your pharmacist about the number of prescriptions that are available to you. Most prescriptions are dispensed in a 34-day supply, with the exception of drugs listed on the Maintenance Drug List. These are dispensed in a 100-day or two-month supply.
- Each eligible prescription will cost $20.

**Is the dispensing fee included in the $20?**

- The dispensing fee is included in the total cost of the prescription.
- If the total cost of the prescription, including the dispensing fee, is more than $20, you will still pay only $20 for eligible prescriptions.

**Will my private insurer/third party plan cover the additional $5 cost per prescription?**

- Contact your private insurer/employer plan to see what their policy would be.

**How can I get more information about the changes to the Seniors’ Drug Plan?**

- Information is also available online at [www.health.gov.sk.ca/seniors-prescription-drug-plan](http://www.health.gov.sk.ca/seniors-prescription-drug-plan).
- Contact the Drug Plan in Regina toll free at 1-800-667-758 or in Regina at 787-3317.