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Saskatchewan Provincial Health Insurance Plan: Fact Sheet

Services Provided by the Saskatchewan Health Insurance Plan:

Prescription Drugs	• Seniors aged 65 and older pay a maximum of $25 for prescription drugs listed on the Saskatchewan formulary. Program eligibility is determined by age and annual net income. • Children aged 14 and under are automatically eligible for the Children's Drug Plan. Families will pay a maximum of $25 per prescription drug listed on the Saskatchewan formulary.
Ambulance	• No coverage for ground ambulance under age 65; residents pay ~$245–$325 per trip. Seniors 65+ pay a capped fee of $135 per trip. • Air ambulance is subsidized; residents pay $465 per flight.
Dental Benefits	• No coverage for routine dental care. Limited coverage for medically necessary oral surgery, orthodontics for cleft palate, and extractions required before certain major surgeries or cancer treatments. • Dental implants covered only in exceptional medical cases (tumors, congenital defects). • The Canadian Dental Care Plan (CDCP) is federally administered.
Eye Care Services	• No coverage for contact lenses or eyeglasses. • One exam per year for residents under 18 and for those with diabetes; emergencies and related follow-ups are covered for all. Routine adult exams (without diabetes) are not covered.
Hospitals	• Coverage for standard ward rooms only.
Hearing Aids	• Not covered under standard benefits. Some coverage may be available through Supplementary or Family Health Benefits. • Cochlear Implant Processor Replacement Program provides partial funding with a set co-payment.

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Services Provided by the Saskatchewan Health Insurance Plan:

Medical Supplies	• Some coverage available under the Saskatchewan Aids to Independent Living (SAIL) program for those suffering a long-term physical disability.
Nursing and Home Care Benefits	• Coverage includes case management, home nursing, and therapy. Partial, income-based coverage for homemaking, meals, and home maintenance. • Private-duty nursing is not covered.
Paramedical	• Physiotherapy and occupational therapy services are covered only when provided in a hospital, special care home, community agency, or private clinic that has a contract with the Saskatchewan Health Authority. • Coverage is available for some podiatry and chiropractic services only through specific provincial benefit programs (e.g., Supplementary Health or Family Health Benefits). • No coverage for massage therapy, naturopath, or osteopath.
Out of Country	• Coverage for emergency in-patient services up to $100 per day. • Coverage for an out-patient hospital visit, up to $50, but no more than two visits in any one day. • Emergency physician services paid at Saskatchewan rates for eligible services.

This Fact Sheet is for general reference only. Every effort has been made to ensure the accuracy of the provincial information. Federal program details may differ and are not included in this fact sheet. Coverage details are subject to change, corrections, and updates. For more information, please contact Saskatchewan Health.

http://www.health.gov.sk.ca/

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