

MEDICAL SERVICES INSURANCE

ANNUAL STATISTICAL TABLES

12 MONTHS ENDING MARCH 31, 2004

(with comparative statistics for previous years)

PREPARED BY HEALTH ECONOMICS Nova Scotia Department of Health

available at http://www.gov.ns.ca/health/

(April 2005)

List of Tables and Figures

PAGE

1.	POPULATION	ON DATA	
	Figure 1	Population by 5 Year Age Groups, Nova Scotia	4
	Table1.1	Distribution of Population by Age Group	5
2.	ACTUAL FI	NANCIAL PAYMENTS TO PHYSICIANS	
	Figure 2	Actual Financial Payments to Physicians, (Current Dollars)	7
	Figure 3	Actual Financial Payments to Physicians, (Current Dollars)	
	Table 2.1	Medical Payments Financial Report	
3.	STATISTIC	AL DATA	
	Table 3.1	Summary of Payments for All M.S.I. Programs	11
1	DHASICIVN	S' SERVICES	
4.	Table 4.1		12
	Table 4.1	Payment Summary Total Payments for Physicians' Services and Expenditure Per Insured Person	
	Table 4.2	Number of Physicians by Payment Category	
	Table 4.3	Utilization Summary of Physicians' Services	16
	Table 4.4	Gross Payments by District Health Authority (DHA)	
	Figure 4	Map of District Health Authorities	
	Table 4.6	Distribution of Gross Payments by Functional Specialty and District Health Authority (DHA)	
	Table 4.7	Distribution of Physicians by Functional Specialty and Payment Range	
	Table 4.7	Fee-for-Service, Number of Services by Type of Service	
	Table 4.9	Fee-for-Service, Amount Paid by Type of Service	
	Table 4.10	Fee-for-Service, Services per 1,000 Insured Persons	
	Table 4.11	Fee-for-Service, Amount Paid per 1,000 Insured Persons	
	Table 4.12	Fee-For-Service Expenditure Per Insured Person by Age Group and Sex	
	Table 4.13	Expenditure Per Patient by District Health Authority (DHA) of Patient Residence	
	Table 4.14	Utilization Data and Expenditure per Patient by DHA of Patient Residence	

5.	DENTAL PR	ROGRAMS	
	Table 5.1	Dental Programs Payment Summary	29
	Table 5.2	Children's Oral Health Program Utilization Summary	30
	Table 5.3	Dental Surgical Program Utilization Summary	
	Table 5.4	IWK Dental Alternate Funding Program Utilization Summary	32
	Table 5.5	Special Dental Program - Maxillofacial Prosthodontics Utilization Summary	33
	Table 5.6	Special Dental Program - Cleft Palate Utilization Summary	
	Table 5.7	Special Dental Program - Mentally Challenged Utilization Summary	35
	Table 5.8	Special Dental Program - Special Considerations Utilization Summary	36
6.	OPTOMET Table 6.1	RIC SERVICES Payment and Utilization Summary	38
7.	PROSTHET Table 7.1	TIC PROGRAMS Payment Summary	
	Table 7.2	Breast Prostheses Utilization Summary	41
	Table 7.3	Limb Prostheses Utilization Summary	42
	Table 7.4	Ocular Prostheses Utilization Summary	43
8.	_	ARE PROGRAMS	
	Table 8.1	Seniors' Pharmacare Payment and Utilization Summary	
	Table 8.2	Seniors' Pharmacare Female Drug Utilization by Age	
	Table 8.3	Seniors' Pharmacare Male Drug Utilization by Age	
	Table 8.4	Seniors' Pharmacare Total Drug Utilization by Age	
	Table 8.5	Pharmacare Utilization by District Health Authority	
	Table 8.6	Special Funding Assistance Programs for Residents	
	Table 8.7	Special Funding Assistance for Residents with Cystic Fibrosis	
	Table 8.8	Special Funding Assistance for Residents with Diabetes Insipidus	52
	Table 8.9	Special Funding Assistance for Residents with Cancer	
	Table 8.10	Special Funding Assistance for Residents with Growth Hormone Deficiency	54

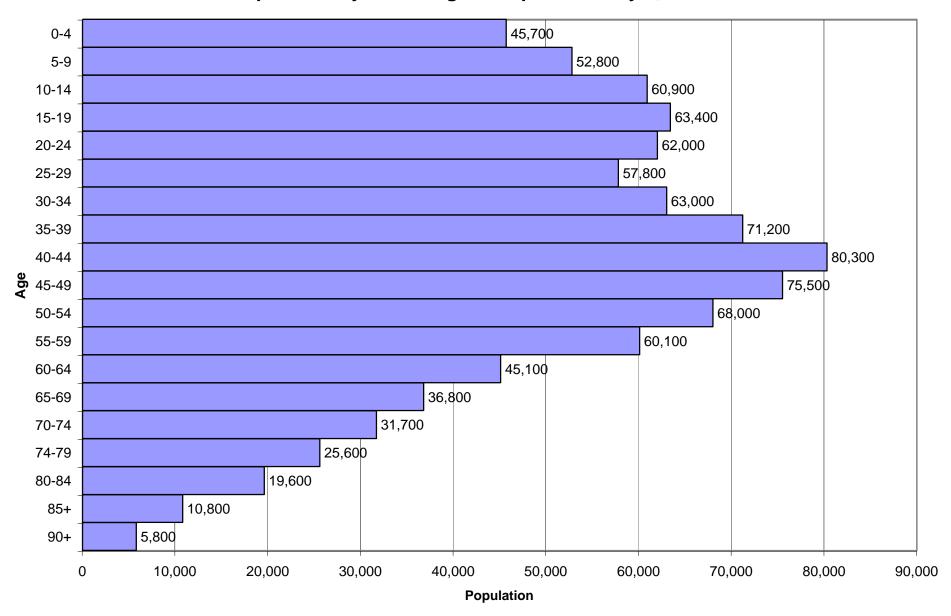


Section One

Population Data

Nova Scotia Department of Health - Figure 1

Population By 5 Year Age Groups as of July 1, 2003



Distribution of Population¹ by Age Group As of July 1st of each year

							Perc	ent Cha	nge	
Age Group	1999/00	2000/01	2001/02 ^{2,3}	2002/03 ^{2,3}	2003/04 ^{2,3}	99/00	00/01	01/02	02/03	03/04
Total	939,800	941,000	932,400	934,500	936,000	0.0	0.1	(0.9)	0.2	0.2
0 - 4	51,500	49,900	48,300	46,700	45,700	(3.6)	(3.1)	(3.2)	(3.3)	(2.1)
5 - 9	60,300	58,600	56,300	54,600	52,800	(2.6)	(2.8)	(3.9)	(3.0)	(3.3)
10 - 14	62,700	63,000	62,000	61,500	60,900	0.3	0.5	(1.6)	(0.8)	(1.0)
15 - 19	*	•	•	•	· ·			` '	` '	0.2
	63,900	63,900	62,900	63,300	63,400	1.3	0.0	(1.6)	0.6	
20 - 24	63,000	62,200	60,600	61,000	62,000	1.3	(1.3)	(2.6)	0.7	1.6
25 - 29	64,000	63,400	59,400	58,300	57,800	0.5	(0.9)	(6.3)	(1.9)	(0.9)
30 - 34	69,400	67,000	63,900	63,600	63,000	(3.7)	(3.5)	(4.6)	(0.5)	(0.9)
35 - 39	81,500	81,000	78,000	74,900	71,200	0.2	(0.6)	(3.7)	(4.0)	(4.9)
40 - 44	78,300	79,200	78,800	79,800	80,300	1.8	1.1	(0.5)	1.3	0.6
45 - 49	69,900	71,700	72,400	74,200	75,500	1.7	2.6	1.0	2.5	1.8
50 - 54	63,800	66,400	68,100	67,900	68,000	5.1	4.1	2.6	(0.3)	0.1
55 - 59	47,900	50,200	52,400	56,700	60,100	4.1	4.8	4.4	8.2	6.0
60 - 64	39,700	40,400	41,700	43,200	45,100	2.1	1.8	3.2	3.6	4.4
65 - 69	35,300	35,500	36,200	36,400	36,800	0.6	0.6	2.0	0.6	1.1
70 - 74	30,500	30,300	31,000	31,400	31,700	0.0	(0.7)	2.3	1.3	1.0
75 - 79	26,000	25,500	25,800	25,500	25,600	0.0	(1.9)	1.2	(1.2)	0.4
80 - 84	17,500	17,900	18,900	19,400	19,600	0.0	2.3	5.6	2.6	1.0
85 - 89	9,900	10,100	10,500	10,800	10,800	3.1	2.0	4.0	2.9	0.0
90+	4,700	4,800	5,100	5,400	5,800	4.4	2.1	6.3	5.9	7.4

Statistics Canada population Census estimates, as of July 1st each year, include Armed Forces and RCMP personnel.
 Column may not add to total due to rounding.

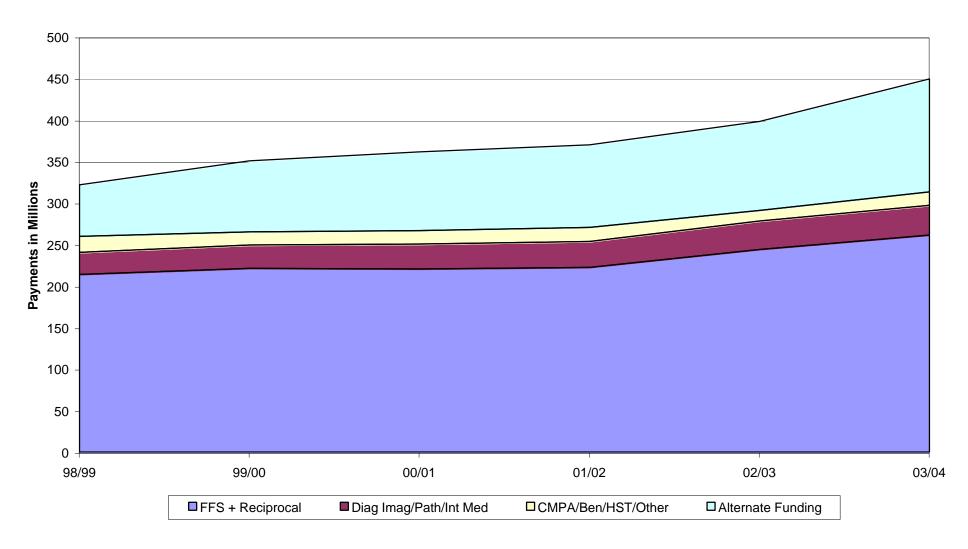
³ New population estimates based on 2001 Census.



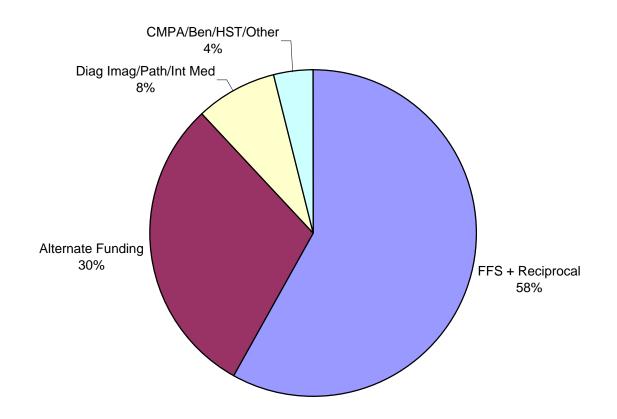
Section Two

Actual Financial Payments to Physicians

Actual Financial Payments to Physicians Nova Scotia, 1998/99 to 2003/04 (Current Dollars)



Actual Financial Payments to Physicians by Use of Funds Nova Scotia 2003/04 (Current Dollars)



Medical Payments Financial Report¹

	Actuals	Actuals	Actuals	Actuals	Actuals		Perd	cent Cha	ange	
Payment Type	99/00	00/01	01/02	02/03	03/04	99/00	00/01	01/02	02/03	03/04
Fee for Service and Reciprocal										
Fee for Service	216,781,802	215,643,410	217,549,021	238,125,118	255,924,256	3.4	(0.5)	0.9	9.5	7.5
Reciprocal Billing	4,441,830	4,759,750	4,863,633	5,399,747	5,044,883		7.2	2.2	11.0	(6.6)
Subtotal	221,223,632	220,403,160	222,412,654	243,524,865	260,969,139		(0.4)	0.9	9.5	7.2
Diag Image/Path Rad/Int Med	27,885,214	30,049,158	30,990,643	34,272,882	35,834,158	4.6	7.8	3.1	10.6	4.6
Alternate Funding										
Alternate Funding	76,283,865	85,624,417	90,345,638	97,192,355	125,474,466	43.6	12.2	5.5	7.6	29.1
Rural Stabilization	9,016,601	9,240,289	9,083,446	10,301,904	10,538,254	2.6	2.5	(1.7)	13.4	2.3
Subtotal	85,300,466	94,864,706	99,429,084	107,494,259	136,012,720	37.8	11.2	4.8	8.1	26.5
CMPA, Benefits, HST and Other										
Benefits	2,172,897	2,114,299	3,996,105	4,000,000	4,000,000	(40.0)	(2.7)	89.0	0.1	0.0
CMPA	5,150,000	5,150,000	4,450,136	4,072,971	4,372,713	0.0	0.0	(13.6)	(8.5)	7.4
Managed Care Initiatives	0	0	0	0	0			, ,	, ,	
HST Rebate	7,052,297	7,392,978	7,471,404	(178,424.0)	0	4.6	4.8	1.1	(102.4)	(100.0)
Consultant's Fund	74,939	(4,747)	14,315	39,943	23,866	58.6	(106.3)	(401.6)	179.0	(40.2)
Reentry Program	1,365,366	1,477,859	1,120,577	1,814,798	1,531,767	103.3	8.2	(24.2)	62.0	(15.6)
NS CME Community Network	138,500	34,625	0	0	0		(75.0)			
GP Recruitment		90,989	121,260	203,845	203,224			33.3	68.1	(0.3)
Debt Assist & Other Initiatives					267,500					
Physician On-Call				2,750,000	5,368,673					95.2
Subtotal	15,953,999	16,256,003	17,173,797	12,703,133	15,767,743	(17.4)	1.9	5.6	(26.0)	24.1
Grand Total	350,363,311	361,573,027	370,006,178	397,995,139	448,583,760	8.9	3.2	2.3	7.6	12.7

¹ Data provided are Financial Payments with accruals and associated adjustments. There are differences between the Financial Payments shown and the total payments shown in the Statistical Tables. The differences are due to accounting adjustments for accruals, certain recoveries, and retroactive payments.



Section Three

Statistical Data

Summary of Payments¹ Fiscal Years 1999/00 to 2003/04

	1999/00 ⁴	2000/01 ⁴	2000/01 ⁴ 2001/02 ⁴		2002/03 ^{4,5} 2003/04 ⁴		00/01	01/02	02/03	03/04
Total	467,887,282	480,209,671	503,382,442	541,239,106	596,505,371	8.5	2.6	4.8	7.5	10.2
Physicians' Services ²	350,177,455	361,507,881	376,020,534	405,211,557	449,718,269	10.2	3.2	4.0	7.8	11.0
Dental Services	10,102,628	8,721,579	8,909,087	6,263,326	5,938,113	3.6	(13.7)	2.1	(29.7)	(5.2)
Optometric Services	1,869,203	2,071,465	2,180,898	2,496,572	2,816,086	7.4	10.8	5.3	14.5	12.8
Prescription Drugs ³	104,852,982	107,083,599	115,212,910	126,221,412	136,991,459	3.8	2.1	7.6	9.6	8.5
Prosthetic Services	885,014	825,147	1,059,012	1,046,239	1,041,445	(13.3)	(6.8)	28.3	(1.2)	(0.5)

¹ Data are 'date of service'.

² Includes CMPA, Benefit Fund, Rural Stabilization, Emergency.

³ MSI Pharmacare includes Professional Fee, Drug Cost, Upcharge, and Special Funding Assistance Programs. This represents the total expenditure for the Pharmacare programs, not only the Department of Health expenditure.

⁴ Includes miscellaneous accounting adjustments.

⁵ Retroactive payments for Physicians' Services now available for year 2002/03.



Section Four

Physicians' Services

Physicians' Services¹ **Payment Summary by Date of Service**

							Perc	ent Cha	nge	
Payment Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Fee-for-Service										
NS Resident, NS Physician	218,275,145	221,321,154	226,211,130	241,326,901 ²	255,022,543 ²	3.7	1.4	2.2	6.7	5.7
NS Resident, Non NS Physician	4,914,892	4,858,326	5,302,545	5,801,016	5,674,433	3.7	(1.2)	9.1	9.4	(2.2)
Total Fee-for-Service	223,190,037	226,179,480	231,513,675	247,127,917	260,696,976	3.7	1.3	2.4	6.7	5.5
Alternate Funding										
Fixed Periodic Payment - Individual	8,497,706 3	10,264,317 ³	10,740,651 ³	12,825,231	16,478,392	31.1	20.8	4.6	19.4	28.5
Fixed Periodic Payment - Group	38,898,445	42,824,746	47,548,632	53,364,771	79,707,214	107.3	10.1	11.0	12.2	49.4
Sessional	1,477,800	1,511,433	1,529,176	1,303,306	1,461,192	38.8	2.3	1.2	(14.8)	12.1
Psychiatry ⁴	13,835,010	13,563,876	14,234,318	16,371,412	11,219,646	0.4	(2.0)	4.9	15.0	(31.5)
Emergency Room Levels 1 & 2	13,105,276	13,652,411	14,012,036	17,042,608	19,744,391	10.9	4.2	2.6	21.6	15.9
Emerg. Room Lvls 3 & 4 & Remote On Call	9,004,996	9,293,404	9,396,459	10,140,861	10,192,843	(2.0)	3.2	1.1	7.9	0.5
Facility On Call⁵				2,750,000	5,368,673					95.2
Total Alternate Funding	84,819,232	91,110,187	97,461,272	113,798,189	144,172,351	38.8	7.4	7.0	16.8	26.7
Non Patient Specific (NPS)										
Diagnostic Imaging	21,497,994	23,254,466	24,271,077	26,537,296	29,436,627	9.6	8.2	4.4	9.3	10.9
Pathology	3,680,837	3,762,044	3,974,337	4,124,899	2,558,736	5.2	2.2	5.6	3.8	(38.0)
Internal Medicine	2,641,838	2,831,019	3,070,633	3,398,015	3,700,384	(29.3)	7.2	8.5	10.7	8.9
Retro Payments			170,400	2,458,094 ⁶	1,080,644				1342.5	(56.0)
Total Non Patient Specific	27,820,670	29,847,529	31,486,447	36,518,304	36,776,391	3.6	7.3	5.5	16.0	0.7
Other Payments										
HST	7,004,081	7,345,817	7,478,627	0 2	0	9.7	4.9	1.8	n/a	n/a
Benefit Fund	2,172,897	2,114,299	3,996,105	4,000,000	4,000,000	(40.0)	(2.7)	89.0	0.1	0.0
CMPA	5,150,000	5,150,000	4,450,136	4,072,971	4,372,713	0.0	0.0	(13.6)	(8.5)	(1.8)
Miscellaneous Adjustments	20,538	(239,431)	(365,728)	(305,824)	(300,162)	177.9	(1265.8)	52.7	(16.4)	(1.9)
Total Other Payments	14,347,516	14,370,685	15,559,140	7,767,147	8,072,551	(5.4)	0.2	8.3	(50.1)	`3.9 [′]
Total Physician Payments	350,177,455	361,507,881	376,020,534	405,211,557	449,718,269	10.0	3.2	4.0	7.8	11.0

¹ Data provided are 'date of service'.
² HST rebate was included in the Master Unit Value as of October 2002.

³ Data moved from Miscellaneous Adjustments to Fixed Periodic Payment - Individual.

⁴ Includes Hourly Paid, Institutional Psychiatry and Psychiatry Stabilization Funding.

⁵ Facility On Call began in October 2002. ⁶ Adjustment showing retroactive payments now available for year 2002/03.

Total Payments¹ for Physicians' Services and Expenditure Per Insured Person Fiscal Years 1994/95 to 2003/04

Year	Total Paid	Expenditure per	Percentage Change
		Insured Person	from Previous Year
2003/04 ³	449,718,269 4	480.46	10.8 5
2002/03 ³	405,211,557 4	433.66	7.5 ⁵
2001/02 ³	376,020,534	403.29	5.0 5
2000/01 ³	361,507,881	384.17	3.1
1999/00 ³	350,177,455	372.61	9.4
1998/99 ³	318,339,684	340.62	8.7
1997/98 ³	292,910,458	313.34	9.3
1996/97 ²	267,449,785	286.81	0.4
1995/96 ²	262,979,889	285.69	0.3
1994/95	262,405,345	284.73	2.9

Data provided are 'date of payment' before 1997/98; 1997/98 to date are 'date of service'.

² Includes CMPA and Benefit Fund.

Includes CMPA, Benefit Fund, Rural Stabilization, Emergency Room and miscellaneous accounting adjustments.

⁴ Non-Patient Specific Retroactive Payments have been included.

⁵ New population estimates based on 2001 Census.

Physicians' Services¹ Number of Physicians Paid² Fiscal Years 1999/00 to 2003/04

Payment Category	Number of Physicians						Percent Change		
	99/00	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04
Fee-for Service payments only ³	749	752	716	753	784	0.4	(4.8)	5.2	4.1
Physicians receiving types of Alternate Funding ⁴	377	407	423	391	484	8.0	3.9	(7.6)	23.8
Fee-for Service with other combinations of payment types	805	829	864	886	847	3.0	4.2	2.5	(4.4)
Total Physicians receiving Payments	1,931	1,988	2,003	2,030	2,115	3.0	8.0	1.3	4.2

¹ Data provided are 'date of service'.

² Includes physicians with a Fee-for-Service payment => \$1.00 and physicians from Alternate Funded Groups.

³ May include any Alternate Funded Physicians with FFS services but no Shadow Services submitted.

⁴ Alternate Funded Groups include Group Block Funded, Salary, Emergency Room physicians, Remote On Call, Salary, Sessional, Psychiatry, and NonPatient Specific.

Utilization Summary of Physicians' Services by Date of Service Fiscal Years 1999/00 - 2003/04

Utilization Summary						P	ercent (Change)	
	1999/00	2000/01	2001/02 ⁶	2002/03 ⁶	2003/04 ⁶	99/00	00/01	01/02	02/03	03/04
Total Payments for Physicians' Services	350,177,455	361,507,881	376,020,534	405,211,557	449,718,269	10.2	3.2	4.0	7.8	11.0
Total Services ²	8,860,045	8,839,088	8,913,220	9,029,407	9,205,869	4.4	(0.2)	8.0	1.3	2.0
Insured Population ³	939,800	941,000	932,389	934,392	936,025	0.6	0.1	(0.9)	0.2	0.2
Total Persons Registered by MSI ⁴	944,519	948,369	950,525	955,475	956,920	0.7	0.4	0.2	0.5	0.2
Services per Insured	9.4	9.4	9.5	9.6	9.6	3.8	(0.4)	0.7	1.1	0.7
Expenditure per Insured	372.61	384.17	398.88	426.28	480.46	9.6	3.1	3.8	6.9	12.7
Total Beneficiaries⁵ receiving Insured Services	791,288	792,702	788,690	793,362	847,029	0.3	0.2	(0.5)	0.6	6.8
Percent of Beneficiaries ⁵ to Insured Population	84.2	84.2	83.7	84.0	90.5	(0.2)	0.1	(0.7)	0.4	7.8
Services per Beneficiary⁵	9.1	9.0	9.1	9.2	10.9	4.1	(0.6)	0.8	0.7	18.5
Expenditure per Beneficiary⁵	407.38	418.09	436.84	464.72	487.16	10.5	2.6	4.5	6.4	4.8

Data provided are 'date of service'.

² Includes Fee-for-Service, Shadow Services, Pay Patient Services, and Non Patient Specific in patient and outpatient services.

³ Insured Population from Statistics Canada's population data as of July 1st each year.

⁴ A person who is eligible for public funded health services provided by the province of Nova Scotia.

⁵ Excludes Non-Patient Specific (Diagnostic Imaging, Pathology, Internal Medicine) beneficiaries and payments as these claims are submitted in bulk; no demographic data are available.

⁶ Population updated based on 2001 Census.

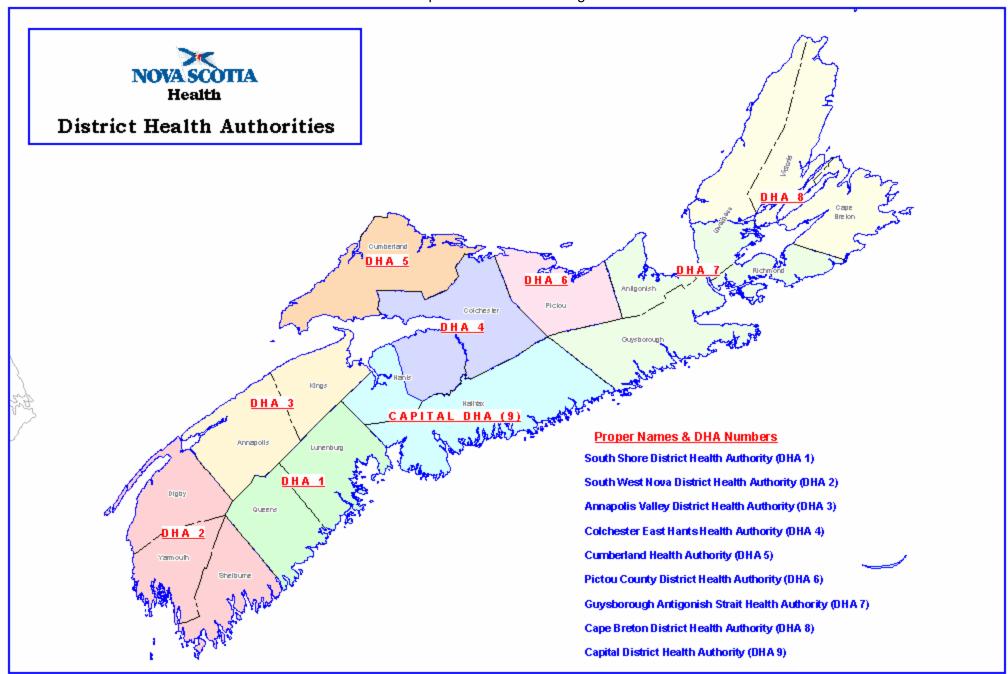
Physicians' Services by Date of Service Fiscal Years 1999/00 - 2003/04

						Percent Change					
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04	
Fee-for-Service	6,225,939	6,153,904	6,175,672	6,243,934	6,360,930	1.6	(1.2)	0.4	1.1	1.9	
Shadow Services	961,739	1,003,145	1,001,188	1,026,140	1,048,029	28.2	4.3	(0.2)	2.5	2.1	
Pay Patient Services ²	7,172	6,186	6,238	6,145	6,407	(12.8)	(13.7)	0.8	(1.5)	4.3	
Non Patient Specific ³											
- Inpatient	533,066	519,419	421,415	464,439	522,630	1.7	(2.6)	(18.9)	10.2	12.5	
- Outpatient	1,132,129	1,156,434	1,308,707	1,288,749	1,267,873	5.3	2.1	13.2	(1.5)	(1.6)	
Total	8,860,045	8,839,088	8,913,220	9,029,407	9,205,869	4.4	(0.2)	0.8	1.3	2.0	

¹ Exludes services for N.S. residents who were attended by a physician during a stay in a province or territory having a reciprocal agreement with N.S. The reciprocal agreement excludes the Province of Quebec and other Countries.

² Includes services for N.S. residents Out-of-County and in Quebec.

³ Diagnostic Imaging, Pathology, and Internal Medicine related testing.



Physicians' Gross Payments¹ District Health Authority by Date of Service Fiscal Years 2000/01 - 2003/04

		2000/01			2001/02			2002/03			2003/04	
District Health Authority	No. of	Amount	Average									
	Physicians ²	Paid	Paid Per									
			Physician			Physician			Physician			Physician
1 - South Shore	90	17,447,615	193,862	91	18,159,982	199,560	108	20,055,361	185,698	116	21,990,094	189,570
2 - South West	80	16,344,018	204,300	79	16,579,630	209,869	84	17,212,514	204,911	84	18,862,876	224,558
3 - Annapolis Valley	132	26,032,511	197,216	136	26,703,748	196,351	138	28,970,409	209,930	147	32,379,371	220,268
4 - Colchester East Hants	89	17,388,598	195,378	92	18,044,449	196,135	95	20,728,278	218,192	104	22,125,992	212,750
5 - Cumberland	50	7,481,301	149,626	53	7,965,939	150,301	54	9,165,831	169,738	61	9,622,623	157,748
6 - Pictou County	63	13,617,618	216,153	71	13,196,000	185,859	68	15,074,684	221,687	74	16,917,743	228,618
7 - Guysborough Antigonish Strait	70	15,111,836	215,883	76	16,860,698	221,851	80	17,632,206	220,403	77	18,489,163	240,119
8 - Cape Breton	235	46,807,868	199,182	232	47,756,449	205,847	241	52,400,423	217,429	260	58,239,466	223,998
9 - Capital ²	1,103	181,221,264	164,299	1,119	190,098,395	169,882	1,140	206,637,056	181,261	1,171	235,423,287	201,045
Other ³	75	4,145,914	55,279	54	1,337,056	24,760	22	914,089	41,550	22	460,782	20,945
Total	1,987	345,598,543	173,930	2,003	356,702,347	178,084	2,030	388,790,851	191,523	2,116	434,511,397	205,346

¹ Includes Fee-for-Service, Fixed Periodic Payments/Sessional, Pathology/Radiology/Internal Medicine Contracts, Emergency Unit payments, On-Call payments, and Alternate Block Funded groups. Excludes CMPA & Benefit Funds and Miscellaneous Accounting Adjustments.

² Physician count includes all physicians with a payment => \$1.00.

³ Other includes Administration, Occupational Medicine (GP), and locums working in more than one DHA.

District Health Authority Distribution of Gross Payments¹ by Functional Specialty Fiscal Year April 1, 2003 - March 31, 2004

	G	eneral Praction	ce²		Specialists ^{2,}	3	Total			
District Health Authority	No. of	Payments	Average Per	No. of	Payments	Average Per	No. of	Payments	Average Per	
	Physicians ⁴		Physician	Physicians ⁴		Physician	Physicians⁴		Physician	
1 - South Shore	66	11,688,915	177,105	50	10,301,179	206,024	116	21,990,094	189,570	
2 - South West	49	11,173,840	228,038	35	7,689,036	219,687	84	18,862,876	224,558	
3 - Annapolis Valley	72	13,933,284	193,518	75	18,446,087	245,948	147	32,379,371	220,268	
4 - Colchester East Hants	60	11,666,191	194,437	44	10,459,802	237,723	104	22,125,992	212,750	
5 - Cumberland	37	6,743,211	182,249	24	2,879,412	119,976	61	9,622,623	157,748	
6 - Pictou County	39	7,696,391	197,343	35	9,221,352	263,467	74	16,917,743	228,618	
7 - Guysborough Antigonish Strait	37	9,674,333	261,468	40	8,814,830	220,371	77	18,489,163	240,119	
8 - Cape Breton	126	24,944,475	197,972	134	33,294,991	248,470	260	58,239,466	223,998	
9 - Capital	417	61,221,278	146,814	754	174,202,009	231,037	1171	235,423,287	201,045	
Other ⁵							22	460,782	20,945	
Total	903	158,741,917	175,794	1,191	275,308,698	231,158	2,116	434,511,397	205,346	

¹ Data provided are 'date of service'.

² Alternate Funded Emergency Room Units Level 2, 3, and 4 amounts paid have been included in General Practice as the majority of physicians in these units are General Practitioners.

³ Includes Palliative Care.

⁴ Physician count includes all physicians with a payment => \$1.00.

⁵ Administration, Occupational Medicine (GP), and locums working in more than one DHA.

Nova Scotia Department of Health - Table 4.8

Physician Services¹ Fee-For-Service and Shadow Services Number of Services by Type of Service

	2000	/01	2001	1/02	2002/	03	2003/0)4	Р	ercent	Chang	ge
	No. of	% of										
	Services	Total	Services	Total	Services	Total	Services	Total	00/01	01/02	02/03	03/04
Consultations	446,171	6.2	436,854	6.1	440,695	6.1	438,973	5.9	(0.9)	(2.1)	0.9	(0.4)
Office Visits	3,608,698	50.5	3,612,530	50.3	3,693,800	50.8	3,753,652	50.7	(0.6)	0.1	2.2	1.6
Home Visits	43,733	0.6	40,701	0.6	38,093	0.5	36,801	0.5	(8.6)	(6.9)	(6.4)	(3.4)
Nursing Home Visits	83,588	1.2	82,836	1.2	83,926	1.2	83,806	1.1	(5.2)	(0.9)	1.3	(0.1)
Hospital Visits	554,965	7.8	540,419	7.5	522,592	7.2	528,268	7.1	(3.7)	(2.6)	(3.3)	1.1
Other Visits	183	<0.1	263	<0.1	388	<0.1	174	0.0	(37.5)	43.7	47.5	(55.2)
Emergency & Out-Patient Dept. Visit	531,862	7.4	531,737	7.4	519,940	7.2	517,227	7.0	(4.1)	(0.0)	(2.2)	(0.5)
Intensive/Critical Care	58,722	8.0	59,506	0.8	57,762	0.8	58,517	8.0	(1.4)	1.3	(2.9)	1.3
Psychiatric Services	136,911	1.9	132,765	1.8	131,280	1.8	123,233	1.7	(4.9)	(3.0)	(1.1)	(6.1)
Subtotal	5,464,833	76.4	5,437,611	75.8	5,488,476	75.5	5,540,651	74.8	(1.6)	(0.5)	0.9	1.0
Eye Examinations	38,776	0.5	42,745	0.6	41,729	0.6	29,293	0.4	5.1	10.2	(2.4)	(29.8)
Other Diagnostic & Therapeutic	669,730	9.4	688,906	9.6	712,452	9.8	734,682	9.9	0.8	2.9	3.4	3.1
Subtotal	708,506	9.9	731,651	10.2	754,181	10.4	763,975	10.3	1.0	3.3	3.1	1.3
Obstetrical Care	84,957	1.2	83,174	1.2	87,988	1.2	87,419	1.2	(8.5)	(2.1)	5.8	(0.6)
Major Surgery	89,216	1.2	90,098	1.3	92,363	1.3	93,366	1.3	1.8	1.0	2.5	1.1
Minor Surgery	97,455	1.4	100,024	1.4	97,193	1.3	94,920	1.3	0.1	2.6	(2.8)	(2.3)
Surgical Assist	18,827	0.3	19,396	0.3	19,319	0.3	18,792	0.3	4.4	3.0	(0.4)	(2.7)
Anaesthesia	84,686	1.2	80,982	1.1	81,699	1.1	79,706	1.1	(3.3)	(4.4)	0.9	(2.4)
Subtotal	290,184	4.1	290,500	4.0	290,574	4.0	286,784	3.9	(0.2)	0.1	0.0	(1.3)
All Other Services ²	602,383	8.4	633,923	8.8	648,573	8.9	730,125	9.9	9.2	5.2	2.3	12.6
Total Fee-for-Service	7,150,863	100.0	7,176,859	100.0	7,269,792	100.0	7,408,954	100.0	(0.5)	0.4	1.3	1.9
Pay Patient ³	6,186		6,238		6,145		6,461		(13.7)	8.0	(1.5)	5.1
Grand Total	7,157,049		7,183,097		7,275,937		7,415,415		(0.5)	0.4	1.3	1.9

Data provided are 'date of service' and include Shadow Services from Alternate Funded Programs.

² Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.

³ Includes Out-of-Country and Quebec services for Nova Scotia residents.

Physician Services Fee-For-Service Payments¹ **Amount Paid by Type of Service**

	2000/01		2001/02	2	2002/03	3	2003/04	4	Pe	ercent	Chang	je
	Amount Paid	% of	Amount Paid	% of	Amount Paid	% of	Amount Paid	% of				
		Total		Total		Total		Total	00/01	01/02	02/03	03/04
Consultations	29,138,000	13.2	28,316,177	12.8	29,925,316	12.4	30,650,941	12.0	(0.1)	(2.8)	5.7	2.4
Office Visits	79,863,171	36.2	80,621,374	36.5	91,666,377	38.0	99,262,005	39.0	1.3	0.9	13.7	8.3
Home Visits	1,653,348	0.8	1,533,546	0.7	1,495,487	0.6	1,469,921	0.6	(8.5)	(7.2)	(2.5)	(1.7)
Nursing Home Visits	1,712,562	8.0	1,716,250	8.0	1,812,853	0.8	1,840,163	0.7	(3.6)	0.2	5.6	1.5
Hospital Visits	12,252,591	5.6	11,909,419	5.4	11,989,938	5.0	12,544,132	4.9	(1.7)	(2.8)	0.7	4.6
Other Visits	7,773	<0.1	11,155	<0.1	17,356	<0.1	6,857	0.0	(34.2)	43.5	55.6	(60.5)
Emergency & Out-Patient Dept. Visit	3,136,559	1.4	2,922,149	1.3	2,901,590	1.2	2,899,490	1.1	(4.6)	(6.8)	(0.7)	(0.1)
Intensive/Critical Care	4,302,148	2.0	4,417,261	2.0	4,551,954	1.9	4,814,621	1.9	2.2	2.7	3.0	5.8
Psychiatric Services	10,044,021	4.6	9,621,920	4.4	9,955,690	4.1	9,729,093	3.8	(2.8)	(4.2)	3.5	(2.3)
Subtotal	142,110,171	64.5	141,069,250	63.8	154,316,564	63.9	163,217,224	64.1	0.2	(0.7)	9.4	5.8
Eye Examinations	1,473,533	0.7	1,630,236	0.7	1,649,925	0.7	1,221,660	0.5	9.2	10.6	1.2	(26.0)
Other Diagnostic & Therapeutic	18,109,889	8.2	18,694,518	8.5	20,165,471	8.4	21,543,633	8.5	5.4	3.2	7.9	6.8
Subtotal	19,583,421	8.9	20,324,754	9.2	21,815,396	9.0	22,765,293	8.9	5.7	3.8	7.3	4.4
Obstetrical Care	6,965,457	3.2	6,879,308	3.1	7,836,263	3.2	8,194,623	3.2	(2.3)	(1.2)	13.9	4.6
Major Surgery	28,511,188	12.9	29,081,424	13.2	31,613,127	13.1	33,279,841	13.1	5.7	2.0	8.7	5.3
Minor Surgery	3,536,601	1.6	3,602,664	1.6	3,704,435	1.5	3,692,844	1.5	4.5	1.9	2.8	(0.3)
Surgical Assist	2,489,493	1.1	2,575,634	1.2	2,734,633	1.1	2,730,767	1.1	25.0	3.5	6.2	(0.1)
Anaesthesia	11,234,730	5.1	11,259,307	5.1	12,382,243	5.1	12,708,942	5.0	(2.6)	0.2	10.0	2.6
Subtotal	45,772,012	20.8	46,519,029	21.0	50,434,438	20.9	52,412,394	20.6	4.3	1.6	8.4	3.9
All Other Services ²	5,968,861	2.7	6,340,760	2.9	6,943,284	2.9	8,081,356	3.2	10.4	6.2	9.5	16.4
Total Fee-for-Service	220,399,923	100.0	221,133,101	100.0	241,345,945	100.0	254,670,890	100.0	1.6	0.3	9.1	5.5
Pay Patient ³	248,061		308,923		308,983		353,873		(18.8)	24.5	0.0	14.5
Grand Total	220,647,984		221,442,024		241,654,928		255,024,762		1.6	0.4	9.1	5.5

Data provided are 'date of service'.

Data provided are 'date of service'.

Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.

³ Includes Out-of-Country and Quebec services for Nova Scotia residents.

Physicians Services¹ Fee-For-Service and Shadow Services Services Per 1,000 Insured Persons²

	Numb	oer of Sei	rvices Pe	r 1,000 In	sured		Perc	ent Chan	ge	
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Consultations	479	474	465	472	469	(0.2)	(1.0)	(1.8)	1.3	(0.6)
Office Visits	3,863	3,835	3,849	3,953	4,010	(1.7)	(0.7)	0.4	2.7	1.4
Home Visits	51	46	43	41	39	(6.6)	(8.7)	(6.7)	(6.0)	(3.6)
Nursing Home Visits	94	89	88	90	90	(1.4)	(5.3)	(0.6)	1.8	(0.3)
Hospital Visits	613	590	576	559	564	(1.8)	(3.8)	(2.4)	(2.9)	0.9
Other Visits	0.3	0.2	0.3	0.4	0	(20.4)	(37.6)	44.1	48.2	(55.2)
Emergency & Out-Patient Dept. Visit	590	565	567	556	553	(4.2)	(4.2)	0.2	(1.8)	(0.7)
Intensive/Critical Care	63	62	63	62	63	(2.3)	(1.6)	1.6	(2.5)	1.1
Psychiatric Services	153	145	141	140	132	(5.8)	(5.0)	(2.8)	(0.7)	(6.3)
Subtotal	5,907	5,807	5,794	5,874	6,743	(2.0)	(1.7)	(0.2)	1.4	14.8
Eye Examinations	39	41	46	45	31	3.9	4.9	10.5	(1.9)	(29.9)
Other Diagnostic & Therapeutic	707	712	734	762	785	(13.8)	0.7	3.1	3.9	2.9
Subtotal	746	753	780	807	816	(13.0)	0.9	3.5	3.5	1.1
Obstetrical Care	99	90	89	94	93	(3.9)	(8.6)	(1.8)	6.3	(8.0)
Major Surgery	93	95	96	99	100	2.1	1.6	1.3	3.0	0.9
Minor Surgery	104	104	107	104	101	(2.4)	(0.0)	2.9	(2.4)	(2.5)
Surgical Assist	19	20	21	21	20	(2.2)	4.2	3.3	0.0	(2.9)
Anaesthesia	93	90	86	87	85	(1.3)	(3.4)	(4.1)	1.3	(2.6)
Subtotal	309	308	310	311	306	(0.7)	(0.3)	0.4	0.5	(1.5)
All Other Services ³	587	640	675	694	780	1,887.0 ⁵	9.1	5.5	2.8	12.4
TOTAL ⁴	7,648	7,599	7,647	7,780	8,739	4.4	(0.6)	0.6	1.7	12.3

¹ Data provided are 'date of service' and include shadow services from Alternate Funded Programs.

² Insured population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel. Years 2001/02, 2002/03 and 2003/04 have new population estimates based on 2001 Census.

³ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.

 $^{^{\}rm 4}\,$ Columns may not add to totals and subtotals due to rounding.

⁵ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.

Physician Services Fee-For-Service Payments¹ Amount Paid Per 1,000 Insured Persons²

		Amount Pa	aid Per 1,000	Insured			Perc	ent Cha	ange	
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Consultations	31,050	30,965	30,259	32,026	32,747	(6.6)	(0.3)	(2.3)	5.8	2.2
Office Visits	83,879	84,871	86,152	98,102	106,049	9.8	1.2	13.9	13.9	8.1
Home Visits	1,923	1,757	1,639	1,600	1,570	(5.8)	(8.6)	(2.3)	(2.3)	(1.9)
Nursing Home Visits	1,891	1,820	1,834	1,940	1,966	0.5	(3.8)	5.8	5.8	1.3
Hospital Visits	13,256	13,021	12,726	12,832	13,402	31.1	(1.8)	8.0	8.0	4.4
Other Visits	13	8	12	19	7	(3.3)	(34.3)	55.8	55.8	(60.6)
Emergency & Out-Patient Dept. Visit	3,498	3,333	3,123	3,105	3,098	(13.8)	(4.7)	(0.6)	(0.6)	(0.2)
Intensive/Critical Care	4,480	4,572	4,720	4,872	5,144	(12.9)	2.0	3.2	3.2	5.6
Psychiatric Services	10,994	10,674	10,282	10,655	10,394	(1.6)	(2.9)	3.6	3.6	(2.4)
Subtotal	150,985	151,020	150,747	165,150	174,377	4.8	0.0	9.6	9.6	5.6
Eye Examinations	1,436	1,566	1,742	1,766	1,305	5.5	9.0	1.4	1.4	(26.1)
Other Diagnostic & Therapeutic	18,278	19,245	19,977	21,581	23,017	(19.5)	5.3	8.0	8.0	6.7
Subtotal	19,714	20,811	21,719	23,347	24,322	(18.1)	5.6	7.5	7.5	4.2
Obstetrical Care	7,586	7,402	7,351	8,386	8,755	0.7	(2.4)	14.1	14.1	4.4
Major Surgery	28,696	30,299	31,077	33,833	35,555	3.5	5.6	8.9	8.9	5.1
Minor Surgery	3,602	3,758	3,850	3,965	3,945	(0.7)	4.3	3.0	3.0	(0.5)
Surgical Assist	2,120	2,646	2,752	2,927	2,917	12.9	24.8	6.3	6.3	(0.3)
Anaesthesia	12,271	11,939	12,032	13,252	13,578	(5.8)	(2.7)	10.1	10.1	2.5
Subtotal	46,688	48,642	49,710	53,975	55,996	0.9	4.2	8.6	8.6	3.7
All Other Services ³	5,755 ⁴	6,343	6,776	7,431	8,634	146.2	10.2	9.7	9.7	16.2
TOTAL ⁵	230,728	234,219	236,304	258,290	272,084	2.9	1.5	9.3	9.3	5.3

¹ Data provided are 'date of service'.

² Insured population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel. Years 2001/02, 2002/03 and 2003/04 have new population estimates based on 2001 Census.

³ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.

⁴ In 1999/00 the following fees were introduced: Pap Smear Tray Fee, Provincial Immunization Injections and Immunization Tray Fee.

⁵ Columns may not add to totals and subtotals due to rounding.

Fee-For-Service Expenditure¹ Per Insured Person By Age Group and Sex Fiscal 2003/04

	Insured ²	Ex	penditure Per In	sured
Age Group	Population	Male	Female	Total
0 - 4	45,700	206.32	190.34	198.36
5 - 9	52,800	104.19	90.63	97.64
10 - 14	60,900	79.67	74.02	76.89
15 - 19	63,400	83.32	152.13	116.82
20 - 24	62,000	76.74	239.84	158.27
25 - 29	57,800	86.33	310.94	200.20
30 - 34	63,000	106.17	329.91	218.93
35 - 39	71,200	127.64	276.59	202.05
40 - 44	80,300	152.64	267.85	210.42
45 - 49	75,500	191.69	287.80	240.42
50 - 54	68,000	244.97	315.39	280.73
55 - 59	60,100	322.66	357.73	340.65
60 - 64	45,100	414.06	408.73	410.96
65 - 69	36,800	555.42	528.42	541.04
70 - 74	31,700	668.53	601.95	632.17
75+	61,800	826.80	687.32	739.53
Total	936,000 ³	227.90	314.50	272.08

¹ Data provided are 'date of service'.

Insured population from Statistics Canada new estimates based on 2001 Census, as of July 1st each year, include Armed Forces and R.C.M.P personnel.

³ Column does not add to total due to rounding.

Fee-for-Service Payments for Physicians' Services¹ Expenditure Per Insured Person by District Health Authority of Patient Residence Fiscal 2003/04

		Expendi	ture Per Insured	Person
District Health Authority of Patient Residence	Persons Insured ²	General Practitioners	Specialists	Total
1 - South Shore	60,600	144.37	141.31	285.68
2 - South West Nova	63,700	129.77	134.92	264.68
3 - Annapolis Valley	82,400	133.11	142.56	275.67
4 - Colchester East Hants	72,800	120.05	139.49	259.53
5 - Cumberland	33,200	111.81	121.27	233.08
6 - Pictou County	47,500	120.08	159.25	279.33
7 - Guysborough Antigonish Strait	47,000	114.85	144.79	259.64
8 - Cape Breton	130,900	133.02	192.78	325.80
9 - Capital	398,000	129.52	128.12	257.63
TOTAL	936,000	129.05	143.04	272.08

¹ Data provided are 'date of service'.

Insured Population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel. New populations estimates are based on 2001 Census.

³ Column does not add to total due to rounding.

⁴ Includes missing or unknown DHA amount of \$493,590.

Fee-for-Service Payments for Physicians' Services¹ Utilization Data and Expenditure Per Patient by District Health Authority of Patient Residence Fiscal 2003/04

District Health Authority of Patient Residence	Number of Persons Insured ²	Number of Beneficiaries	Utilization Rate	Expenditure Per Beneficiary
1 - South Shore	60,600	50,033	82.6	346.02
2 - South West Nova	63,700	51,739	81.2	325.87
3- Annapolis Valley	82,400	67,423	81.8	336.91
4 - Colchester East Hants	72,800	58,781	80.7	321.43
5 - Cumberland	33,200	24,550	73.9	315.20
6 - Pictou County	47,500	38,427	80.9	345.28
7 - Guysborough Antigonish Strait	47,000	36,910	78.5	330.61
8 - Cape Breton	130,800	107,757	82.4	395.78
9 - Capital	398,000	326,966	82.2	313.61
TOTAL	936,000 ³	758,061 ⁴	81.0	335.95

¹ Data provided are 'date of service'.

² Insured Population from Statistics Canada newest estimates, as of July 1st of each year, include Armed Forces and RCMP. New population estimates are based on 2001 census.

³ Column does not add to total due to rounding.

Total is unique Fee-for-Service beneficiary count. Total by DHA does not add to unique total as some beneficiaries have an 'Unknown' DHA and/or some may be counted in more than one DHA as count is DHA at time of service.



Section Five

Dental Programs

Dental Programs Payment Summary¹ Fiscal Years 1999/00 to 2003/04

						Percent Change				
Payment Summary	1999/00 ²	2000/01 ^{2,3}	2001/02 ³	2002/03 ³	2003/04	99/00	00/01	01/02	02/03	03/04
Children's Oral Health Program	6,963,583	6,563,854	6,883,315	3,994,233 4	3,850,099	(2.0)	(5.7)	4.9	(42.0)	(3.6)
Dental Surgical Program	1,929,519	1,008,100 5	903,100	934,502	902,008	11.9	(47.8)	(10.4)	3.5	(3.5)
Out-of-province	819	0	0	0	0	(49.5)	(100.0)	n/a	n/a	n/a
IWK Dental Alternate Funded Program ⁶	468,363	495,271	458,873	546,090	468,762	115.8	5.7	(7.3)	19.0	(14.2)
Subtotal Dental Programs	9,362,284	8,067,225	8,245,288	5,474,825	5,220,869	3.4	(13.8)	2.2	(33.6)	(4.6)
Special Dental Programs ⁷										
Maxillofacial Prosthodontics	311,835	429,674	436,537	530,671	444,804	(2.9)	37.8	1.6	21.6	(16.2)
Cleft Palate	236,850	116,867	103,608	134,058	132,706	(2.8)	(50.7)	(11.3)	29.4	(1.0)
Mentally Challenged	86,985	93,370	101,671	107,353	112,277	(3.1)	7.3	8.9	5.6	4.6
Sir Frederick Fraser School	2	0	0	0	0	0.0	(100.0)	n/a	n/a	n/a
Special Considerations - Adult	40,231	14,443	21,984	16,418	27,457	(2.2)	(64.1)	52.2	(25.3)	67.2
Subtotal Special Dental Programs	675,903	654,353	663,800	788,500	717,244	(2.9)	(3.2)	1.4	18.8	(9.0)
Total Dental Payments	10,038,187	8,721,579	8,909,087	6,263,326	5,938,113	3.0	(13.1)	2.1	(29.7)	(5.2)

¹ Data provided are 'date of service'

² Totals include Dental Retroactive payments.

³ Totals include Accounting Adjustments.

⁴ In 2002/03 the Department of Health became 'insurer of last resort'.

⁵ A reduction in 2000/01 was due to some services being deinsured.

⁶ IWK Dental Alternate Funding Program began January 1, 1999.

⁷ Special Dental Programs procedures are also provided under the IWK Dental Alternate Funded Program. Amount Paid excludes the block funded paid amount for these procedures. This is included in the Amount Paid in table 5.4.

Children's Oral Health Program Utilization Summary^{1,2} Fiscal Years 1999/0 - 2003/04

						Percent Change				
Utilization Summary	1999/00 ³	2000/01 ⁴	2001/024,8	2002/03 ^{4,8}	2003/04 ⁸	99/00	00/01	01/02	02/03	03/04
Services Rendered	283,978	266,392	260,387	165,397	176,547	(4.9)	(6.2)	(2.3)	(36.5)	6.7
Amount Paid	6,963,583	6,563,854	6,883,315	3,994,233	3,850,099	(2.0)	(5.7)	4.9	(42.0)	(3.6)
Persons Insured ⁶	111,800	108,500	104,600	101,400	98,515	(3.0)	(3.0)	(3.6)	(3.1)	(2.8)
Beneficiaries ⁷	64,375	61,301	59,868	38,747	40,317	(1.7)	(4.8)	(2.3)	(35.3)	4.1
Services Per Insured Person Paid per Insured Person	2.5 62.29	2.5 60.50	2.5 65.81	1.6 39.39	1.8 39.08	(1.9) 1.0	(3.3) (2.9)		(34.5) (40.1)	
Services Per Beneficiary Paid Per Beneficiary	4.4 108.17	4.3 107.08	4.3 114.97	4.3 103.08	4.4 95.50	(3.3) (0.4)	(1.5) (1.0)		(1.9) (10.3)	

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ In 2002/03 the Department of Health became 'insurer of last resort'.

⁶ Insured population from Statistics Canada new estimates as of July 1st of each year.

⁷ Persons receiving insured services.

⁸ New population estimates based on 2001 Census.

Dental Surgical Program Utilization Summary^{1, 2} Fiscal Years 1999/00 - 2003/04

						Percent Change					
Utilization Summary	1999/00 ³	2000/01 ⁴	2001/024,7	2002/03 ⁷	2003/047	99/00	00/01	01/02	02/03	03/04	
Services Rendered	19,422	6,952	4,407	4,363	3,741	14.9	(64.2)	(36.6)	(1.0)	(14.3)	
Amount Paid	1,929,519	1,008,100	903,100	934,502	902,008	11.9	(47.8)	(10.4)	3.5	(3.5)	
Persons Insured ⁵	939,800	941,000	932,400	934,400	936,000	0.6	0.1	(0.9)	0.2	0.2	
Beneficiaries ⁶	9,664	3,456	1,501	1,706	1,536	4.8	(64.2)	(56.6)	13.7	(10.0)	
Services Per Insured Person	0.01	0.01	<.01	<.01	<.01	14.2	(31.5)	(29.2)	15.7	15.7	
Paid per Insured Person	2.05	1.07	0.97	1.00	0.96	11.2	(47.8)	(9.6)	3.3	(3.6)	
Services Per Beneficiary	2.0	2.0	2.9	2.6	2.4	9.6	0.1	46.0	(12.9)	(4.8)	
Paid Per Beneficiary	199.66	291.70	601.67	547.77	587.24	6.8	46.1	106.3	(9.0)	7.2	

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Reduction due to some services being deinsured in August 2000 and further program change in 2001/02.

⁵ Insured population from Statistics Canada new estimates, as of July 1st of each year, include Armed Forces and RCMP personnel.

⁶ Persons receiving insured services.

⁷ New population estimates based on 2001 Census.

IWK Dental Alternate Funded Program Utilization Summary^{1, 2} Fiscal Years 2000/01 to 2003/04

					Percent Change			
Utilization Summary	2000/01	2001/02	2002/03	2003/04	01/02	02/03	03/04	
Services Rendered	5,960	6,391	5,081	4,701	7.2	(20.5)	(7.5)	
Amount Paid	495,271	458,873	546,090	468,762	(7.3)	19.0	(14.2)	
Beneficiaries ³	914	1,133	999	875	24.0	(11.8)	(12.4)	
Services Per Beneficiary	6.5	5.6	5.1	5.4	(13.2)	(9.8)	5.6	
Paid Per Beneficiary	541.87	405.01	546.64	535.73	(25.3)	35.0	(2.0)	
Services by Program								
Children's Oral Health	5,035	5,307	4,329	3,906	5.4	(18.4)	(9.8)	
Cleft Palate	525	653	431	545	24.4	(34.0)	26.5	
Mentally Challenged	338	329	240	201	(2.7)	(27.1)	(16.3)	
Dental Surgery	22	90	78	39	309.1	(13.3)	(50.0)	
Special Considerations	40	12	3	10	(70.0)	(75.0)	233.3	

Data provided are 'date of service'.
 Includes services from the IWK Dental Alternate Funded Program only.

³ Persons receiving insured services.

Special Dental Program - Maxillofacial Prosthodontics Utilization Summary^{1, 2} Fiscal Years 1999/00 - 2003/04

						Percent Change				
Utilization Summary	1999/00 ³	2000/01 ⁴	2001/02 ⁴	2002/03 ⁴	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	1,622	1,626	1,987	1,681	1,256	4.7	0.2	22.2	(15.4)	(25.3)
Amount Paid	368,316	429,674	436,537	530,671	444,804	14.7	16.7	1.6	21.6	(16.2)
Beneficiaries ⁵	583	484	597	531	383	(8.0)	(17.0)	23.3	(11.1)	(27.9)
Services Per Beneficiary	2.8	3.4	3.3	3.2	3.3	13.9	20.8	(0.9)	(4.9)	3.6
Paid Per Beneficiary	631.76	887.76	731.22	999.38	1,161.37	24.7	40.5	(17.6)	36.7	16.2

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Persons receiving insured services.

Special Dental Program - Cleft Palate Utilization Summary^{1, 2} Fiscal Years 1999/00 - 2003/04

						Percent Change				
Utilization Summary	1999/00³	2000/01 ⁴	2001/02 ⁴	2002/034	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	2,146	840	1,007	1,029	1,092	(28.9)	(60.9)	19.9	2.2	6.1
Amount Paid	236,850	116,867 5	103,608	134,058	132,706	(2.8)	(50.7)	(11.3)	29.4	(1.0)
Beneficiaries ⁶	443	183	196	185	190	12.7	(58.7)	7.1	(5.6)	2.7
Services Per Beneficiary	4.8	4.6	5.1	5.6	5.7	(36.9)	(5.2)	11.9	8.3	3.3
Paid Per Beneficiary	534.65	638.62	528.61	724.64	698.45	(13.8)	19.4	(17.2)	37.1	(3.6)

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

³ Totals include Dental Retroactive payments.

⁴ Totals include accounting adjustments.

⁵ Decrease due to many procedures now being provided under the IWK Dental Alternate Funded Program.

⁶ Persons receiving insured services.

Special Dental Program - Mentally Challenged Utilization Summary^{1, 2} Fiscal Years 1999/00 - 2003/04

						Percent Change				
Utilization Summary	1999/00 ³	2000/01 ⁴	2001/02 ⁴	2002/03 ⁴	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	1,469	1,419	1,578	1,647	1,652	(6.1)	(3.4)	11.2	4.4	0.3
Amount Paid	85,341	93,370	101,671	107,353	112,277	(4.9)	9.4	8.9	5.6	4.6
Beneficiaries ⁵	210	200	202	216	202	7.1	(4.8)	1.0	6.9	(6.5)
Services Per Beneficiary	7.0	7.1	7.8	7.6	8.2	(12.3)	1.4	10.1	(2.4)	7.3
Paid Per Beneficiary	406.39	466.85	503.32	497.00	555.83	(11.3)	14.9	7.8	(1.3)	11.8

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

Totals include Dental Retroactive payments.
 Totals include accounting adjustments.

⁵ Persons receiving insured services.

Special Dental Program - Special Considerations - Adult Utilization Summary^{1, 2} Fiscal Years 1999/00 - 2003/04

							Perc	ent Cha	ange	
Utilization Summary	1999/00 ³	2000/014	2001/02 ⁴	2002/03 ⁴	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	204	77	155	97	130	(21.5)	(62.3)	101.3	(37.4)	34.0
Amount Paid	54,217	14,443 5	21,984	16,418	27,457	31.8	(73.4)	52.2	(25.3)	67.2
Beneficiaries ⁶	38	21	27	19	20	22.6	(44.7)	28.6	(29.6)	5.3
Services Per Beneficiary	5.4	3.7	5.7	5.1	6.5	(36.0)	(31.7)	56.6	(11.1)	27.3
Paid Per Beneficiary	1,426.76	687.77	814.20	864.13	1372.86	7.5	(51.8)	18.4	6.1	58.9

¹ Data provided are 'date of service'.

² Excludes services from the IWK Dental Alternate Funded Program. See table 5.4 for the IWK Dental Alternate Funded Program services.

Totals include Dental Retroactive payments.
 Totals include accounting adjustments.
 Decrease due to many procedures now provided under the IWK Dental Alternate Funded Program.

⁶ Persons receiving insured services.



Section Six

Optometric Services

Optometric Services Payment and Utilization Summary Fiscal Years 1999/00 to 2003/04

						Pe	rcent	Chang	е	
Payment Summary	1999/00	2000/01	2001/02 ²	2002/03 ²	2003/04 ²	99/00	00/01	01/02	02/03	03/04
Fee-for-Service Payments	1,869,203	2,071,465	2,180,877	2,496,467	2,815,630	7.4	10.8	5.3	14.5	12.8
Pay Patient	0	0	21	105	456	(100.0)	n/a	n/a	404.5	334.4
Total	1,869,203	2,071,465	2,180,898	2,496,572	2,816,086	7.4	10.8	5.3	14.5	12.8
Utilization Summary										
Services Rendered	54,850	59,302	62,622	68,093	72,659	4.9	8.1	5.6	8.7	6.7
Persons Insured ³	939,800	941,000	932,400	934,400	936,000	0.6	0.1	(0.9)	0.2	0.2
Persons Receiving Services (Beneficiaries)	52,354	55,603	57,942	62,017	65,640	7.1	6.2	4.2	7.0	5.8
Percentage of Persons Insured	5.6	5.9	6.2	6.6	7.0	6.5	6.1	5.2	6.8	5.7
Services per 1,000 Insured	58	63	67	73	78	4.3	8.0	6.6	8.5	6.5
Expenditure per 1,000 Insured	1,989	2,201	2,339	2,672	3,009	6.8	10.7	6.3	14.2	12.6
Services per 1,000 Beneficiaries	1,048	1,067	1,081	1,098	1,107	(2.0)	1.8	1.3	1.6	0.8
Expenditure per 1,000 Beneficiaries	35,703	37,255	37,639	40,256	42,902	0.3	4.3	1.0	7.0	6.6

¹ Data provided are 'date of service'.

² New population estimates based on 2001 Census.

³ Insured population from Statistics Canada's newest estimates, as of July 1st of each year, include Armed Forces and RCMP personnel.



Section Seven

Prosthetic Programs

Prosthetic Programs Payment Summary Fiscal Years 1999/00 to 2003/04

							Perc	ent Cha	ange	
Payment Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Breast	141,101	143,327	159,490	147,276	143,292	3.7	1.6	11.3	(7.7)	(2.7)
Limb	689,208	606,532	801,604	786,238	785,308	(16.1)	(12.0)	32.2	(1.9)	(0.1)
Ocular	54,704	58,099	85,082	90,828	91,243	(13.7)	6.2	46.4	6.8	0.5
Exceptional Considerations	0	17,189	12,836	21,898	0	n/a	n/a	(25.3)	70.6	(100.0)
Total Prosthetic Programs Payments	885,014	825,147	1,059,012	1,046,239	1,019,842	(13.3)	(6.8)	28.3	(1.2)	(2.5)

¹ Data provided are 'date of service'.

Prosthetic Programs - Breast Prostheses Utilization Summary Fiscal Years 1999/00 to 2003/04

						F	Percent	Chang	е	
Utilization Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	812	851	887	866	857	2.7	4.8	4.2	(2.4)	(1.0)
Amount Paid	141,101	143,327	159,490	147,276	143,292	3.7	1.6	11.3	(7.7)	(2.7)
Beneficiaries ²	780	822	847	811	817	1.3	5.4	3.0	(4.3)	0.7
Paid Per Service	173.77	168.42	179.81	170.07	167.20	1.0	(3.1)	6.8	(5.4)	(1.7)
Services Per Beneficiary	1.0	1.0	1.0	1.1	1.0	1.3	(0.6)	1.2	2.0	(1.8)
Paid Per Beneficiary	180.90	174.36	188.30	181.60	175.39	2.4	(3.6)	8.0	(3.6)	(3.4)

¹ Data provided are 'date of service'.

² Persons receiving Insured Services

Prosthetic Programs - Limb Prostheses Utilization Summary Fiscal Years 1999/00 to 2003/04

							Perce	ent Cha	nge	
Utilization Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	979	957	1,003	1,072	1,092	(14.4)	(2.2)	4.8	6.9	1.9
Amount Paid	689,208	606,532	801,604	786,238	785,308	(16.1)	(12.0)	32.2	(1.9)	(0.1)
Beneficiaries ²	370	399	410	417	387	(17.0)	7.8	2.8	1.7	(7.2)
Paid Per Service	703.99	633.78	799.21	733.43	719.15	(2.0)	(10.0)	26.1	(8.2)	(1.9)
Services Per Beneficiary	2.6	2.4	2.4	2.6	2.8	3.2	(9.4)	2.0	5.1	9.8
Paid Per Beneficiary	1,862.72	1,520.13	1,955.13	1,885.46	2,029.22	1.1	(18.4)	28.6	(3.6)	7.6

¹ Data provided are 'date of service'.

² Persons receiving Insured Services.

Prosthetic Programs - Ocular Prostheses Utilization Summary Fiscal Years 1999/00 to 2003/04

							Percent	Change		
Utilization Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Services Rendered	344	385	550	589	578	(19.6)	11.9	42.9	7.1	(1.9)
Amount Paid	54,704	58,099	85,082	90,828	91,243	(13.7)	6.2	46.4	6.8	0.5
Beneficiaries ²	191	245	358	387	384	(14.7)	28.3	46.1	8.1	(8.0)
Paid Per Service	159.02	150.91	154.69	154.21	157.86	7.4	(5.1)	2.5	(0.3)	2.4
Services Per Beneficiary	1.8	1.6	1.5	1.5	1.5	(5.7)	(12.7)	(2.2)	(0.9)	(1.1)
Paid Per Beneficiary	286.41	237.14	237.66	234.70	237.61	1.2	(17.2)	0.2	(1.2)	1.2

¹ Data provided are 'date of service'.

² Persons receiving Insured Services



Section Eight

Pharmacare Programs

Seniors' Pharmacare Program¹ Payment and Utilization Summary Fiscal Years 1999/00 to 2003/04

							Perce	nt Cha	ange	'
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Total Program Expenditure ²	103,931,150	105,181,591	113,074,294	123,822,328	134,556,769	4.5	1.2	7.5	9.5	8.7
Utilization Summary										
No. of Seniors ³	123,800	124,100	127,500	129,000	130,300	0.4	0.2	2.7	1.2	1.0
Insured Population ⁴	103,700	95,600	93,600	94,593	95,664	(4.2)	(7.8)	(2.1)	1.1	1.1
Beneficiaries ⁵	101,827	91,943	91,626	91,737	92,422	(0.2)	(9.7)	(0.3)	0.1	0.7
Percent of Insured Population	98.2	96.2	97.9	97.0	96.6	4.2	(2.1)	1.8	(0.9)	(0.4)
Prescriptions Dispensed	2,747,955	2,708,698	2,764,694	2,883,326	2,996,481	0.7	(1.4)	2.1	4.3	3.9
Prescriptions Per Insured	26.5	28.3	29.5	30.5	31.3	5.1	6.9	4.2	3.2	2.8
Expenditure Per Insured	1,002.23	1,100.23	1,208.06	1,309.00	1,406.56	9.0	9.8	9.8	8.4	7.5
Prescriptions Per Beneficiary	27.0	29.5	30.2	31.4	32.4	0.9	9.2	2.4	4.2	3.2
Expenditure Per Beneficiary	1,020.66	1,143.99	1,234.09	1,349.75	1,455.90	4.7	12.1	7.9	9.4	7.9

¹ Data provided are bsed on 'date of service'.

² Total Expenditure includes Total Professional Fee Paid, Total Drug Cost Paid, Total Upcharge Paid, Chedabucto, and Manual Nursing Homes. Financial adjustments for the Audited statement are not reflected in these statistical tables.

Audited expenditure for 99/00 - \$100,863,047; 00/01 - \$104,159,754; 01/02 - \$113,270,558; 02/03 - \$123,669,314; 03/04 - \$133,962,005.

³ Estimate of insured persons 65 years & older from Statistics Canada as of July 1st each year. New population estimates based on 2001 Census.

⁴ Insured population is from the MSI Premium Billing system. Insurer of last resort was implemented October 1, 1999 affecting approximately 11,000 seniors. Therefore, for 1999/00 insured population was estimated.

⁵ In 1999/00 approximately 11,000 seniors would have been counted as beneficiaries prior to the October 1, 1999 implementation date of insurer of last resort.

Seniors' Pharmacare Program Total Drug Utilization¹ by Age Fiscal Year 2003/04

		Number of		Pharmacists'	Total Drug	Rx Per	Cost Per
Age Group	Beneficiaries	Prescriptions	Drug Cost	Fees ²	Costs ³	Beneficiary	Beneficiary
65 - 69	30,631	777,886	31,860,292	7,010,622	38,870,913	25	1,269.01
70 - 74	21,183	671,156	26,076,420	6,224,940	32,301,360	32	1,524.87
75 - 79	16,807	591,682	21,355,310	5,539,907	26,895,217	35	1,600.24
80 - 84	12,609	484,909	15,717,481	4,512,100	20,229,581	38	1,604.38
85 - 89	7,591	315,508	8,529,102	2,915,388	11,444,490	42	1,507.64
90 - 94	2,842	123,140	2,771,928	1,140,236	3,912,164	43	1,376.55
95 - 99	656	27,924	508,311	271,028	779,339	43	1,188.02
100+	104	4,282	64,189	43,407	107,596	41	1,034.58
Manual Claims					16,493		
Total	92,423	2,996,487	106,883,033	27,657,627	134,557,153	32	1,455.71

¹ Data provided are based on 'date of service'.

² Includes Professional Fee and Upcharge.

³ Total by Age Group excludes Accounting adjustments as age and gender distribution data are not available.

⁴ Total includes manual claims for residents of Nursing Homes and accounting adjustments. Age/gender distribution data are not available for these Homes nor for the adjustments.

⁵ Average cost per beneficiary excludes manual claims for Nursing Home residents as age/gender distribution data are not available.

Seniors' Pharmacare Program

Female Drug Utilization¹ by Age Fiscal Year 2003/04

		Number of		Pharmacists'	Total Drug	Rx Per	Cost Per
Age Group	Beneficiaries	Prescriptions	Drug Cost	Fees ²	Costs	Beneficiary	Beneficiary
65 - 69	16,950	438,414	16,874,412	3,920,196	20,794,609	26	1,226.82
70 - 74	12,263	395,516	14,536,343	3,643,014	18,179,357	32	1,482.46
75 - 79	11,110	405,820	13,783,215	3,761,305	17,544,520	37	1,579.16
80 - 84	9,474	377,688	11,478,534	3,478,666	14,957,201	40	1,578.76
85 - 89	5,814	249,366	6,364,262	2,291,032	8,655,294	43	1,488.70
90 - 94	2,259	100,532	2,122,040	923,112	3,045,152	45	1,348.01
95 - 99	553	24,405	424,404	236,521	660,925	44	1,195.16
100+	94	3,951	58,362	39,900	98,262	42	1,045.34
Total	58,517	1,995,692	65,641,574	18,293,746	83,935,320 ³	34	1,434.37

Male Drug Utilization¹ by Age Fiscal Year 2003/04

Age Group	Beneficiaries	Number of Prescriptions	Drug Cost	Pharmacists' Fees ²	Total Drug Costs	Rx Per Beneficiary	Cost Per Beneficiary
rigo Oroup	Bononolarioo	1 Toodinpalono	Drug Goot	1 000	000.0	Bononolary	Bononolary
65 - 69	13,681	339,472	14,985,879.28	3,090,425	18,076,304	25	1,321.27
70 - 74	8,920	275,640	11,540,077.10	2,581,926	14,122,003	31	1,583.18
75 - 79	5,697	185,862	7,572,095.03	1,778,602	9,350,697	33	1,641.34
80 - 84	3,135	107,221	4,238,946.40	1,033,434	5,272,380	34	1,681.78
85 - 89	1,777	66,142	2,164,839.71	624,356	2,789,196	37	1,569.61
90 - 94	583	22,608	649,887.54	217,124	867,011	39	1,487.16
95 - 99	103	3,519	83,907.37	34,507	118,414	34	1,149.65
100+	10	331	5,827.15	3,507	9,334	33	933.43
Total	33,906	1,000,795	41,241,460	9,363,880	50,605,340 ³	30	1,492.52

Data provided are based on 'date of service'.
 Includes Professional Fee and Upcharge.
 Total excludes Accounting adjustments and manual claims for Nursing Homes as age and gender distribution data are not available.

Seniors' Pharmacare Program Utilization¹ by District Health Authority Fiscal years 2000/01 to 2003/04

District Health Authority		Benefic	iaries²		P	ercent (Change)		Rx C	ount ³		Р	ercent	Chang	e	Rx/Beneficiary			ry
	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04
1 - South Shore	7,839	7,846	7,855	7,879	(6.7)	0.1	0.1	0.3	219,396	224,474	229,079	237,622	(2.2)	2.3	2.1	3.7	28.0	28.6	29.2	30.2
2 - South West Nova	8,332	8,261	8,239	8,285	(5.6)	(0.9)	(0.3)	0.6	275,882	286,904	295,174	307,421	0.3	4.0	2.9	4.1	33.1	34.7	35.8	37.1
3 - Annapolis Valley	8,307	8,299	8,242	8,363	(12.6)	(0.1)	(0.7)	1.5	234,695	239,485	242,971	253,763	(4.4)	2.0	1.5	4.4	28.3	28.9	29.5	30.3
4 - Colchester East Hants	6,910	6,907	6,976	7,061	(7.6)	(0.0)	1.0	1.2	182,824	187,985	202,159	211,357	(0.3)	2.8	7.5	4.5	26.5	27.2	29.0	29.9
5 - Cumberland	4,591	4,600	4,585	4,599	(7.4)	0.2	(0.3)	0.3	153,424	159,958	166,199	176,089	(2.3)	4.3	3.9	6.0	33.4	34.8	36.2	38.3
6 - Pictou County	5,809	5,735	5,698	5,649	(5.7)	(1.3)	(0.6)	(0.9)	187,715	189,695	194,358	201,238	(1.8)	1.1	2.5	3.5	32.3	33.1	34.1	35.6
7 - Guysborough Antigonish Strait	5,705	5,744	5,878	5,913	(1.9)	0.7	2.3	0.6	178,942	189,040	198,054	202,423	2.3	5.6	4.8	2.2	31.4	32.9	33.7	34.2
8 - Cape Breton	16,554	16,574	16,612	16,788	(4.0)	0.1	0.2	1.1	474,383	486,446	499,420	518,546	1.3	2.5	2.7	3.8	28.7	29.3	30.1	30.9
9 - Capital	28,256	28,158	28,179	28,475	(16.2)	(0.3)	0.1	1.1	794,627	797,149	854,831	887,048	(3.1)	0.3	7.2	3.8	28.1	28.3	30.3	31.2
Total	91,943	91,626	91,737	93,095	(9.7)	(0.3)	0.1	1.5	2,708,698	2,764,694	2,883,326	2,996,481	(1.4)	2.1	4.3	3.9	29.5	30.2	31.4	32.2

Data provided are based on 'date of service' and exclude Accounting adjustments and manual claims from Nursing Homes.
 Beneficiaries columns may not add to totals as residents may be counted in more than one District Health Authority.
 Column totals do not agree with the Total due to missing DHAs in data.

Seniors' Pharmacare Program Utilization¹ by District Health Authority Fiscal years 2000/01 to 2003/04

District Health Authority		Benefic	iaries²			Total Exp	enditure³		Pe	ercent	Chan	ge		Cost/Be	neficiary	
	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04	00/01	01/02	02/03	03/04
1 - South Shore	7,839	7,846	7,855	7,879	8,581,677	9,259,935	10,017,241	10,893,222	0.9	7.9	8.2	8.7	1,094.74	1,180.21	1,275.27	1,382.56
2 - South West Nova	8,332	8,261	8,239	8,285	9,712,192	10,633,985	11,471,115	12,379,567	2.7	9.5	7.9	7.9	1,165.65	1,287.25	1,392.29	1,494.21
3 - Annapolis Valley	8,307	8,299	8,242	8,363	8,937,171	9,587,080	10,316,222	11,451,522	(1.3)	7.3	7.6	11.0	1,075.86	1,155.21	1,251.66	1,369.31
4 - Colchester East Hants	6,910	6,906	6,976	7,061	7,484,067	8,090,381	9,006,459	9,957,222	1.9	8.1	11.3	10.6	1,083.08	1,171.50	1,291.06	1,410.17
5 - Cumberland	4,591	4,600	4,585	4,599	5,481,970	5,999,144	6,610,206	7,123,651	0.3	9.4	10.2	7.8	1,194.07	1,304.16	1,441.70	1,548.96
6 - Pictou County	5,809	5,736	5,698	5,649	7,113,480	7,548,745	8,128,817	8,643,508	1.4	6.1	7.7	6.3	1,224.56	1,316.03	1,426.61	1,530.10
7 - Guysborough Antigonish Strait	5,705	5,744	5,878	5,913	6,627,959	7,205,007	7,940,717	8,442,012	5.1	8.7	10.2	6.3	1,161.78	1,254.35	1,350.92	1,427.70
8 - Cape Breton	16,554	16,574	16,612	16,788	18,591,946	20,099,638	21,865,167	24,209,268	3.9	8.1	8.8	10.7	1,123.11	1,212.72	1,316.23	1,442.06
9 - Capital	28,256	28,158	28,179	28,475	31,864,635	34,723,187	38,395,954	41,392,417	(2.0)	9.0	10.6	7.8	1,127.71	1,233.16	1,362.57	1,453.64
Total	91,943	91,626	91,737	93,095	104,665,049	113,279,430	123,801,888	134,539,649	0.8	8.2	9.3	8.7	1,138.37	1,236.32	1,349.53	1,445.19

Data provided are based on 'date of service'
 Beneficiaries columns may not add to totals as residents may be counted in more than one District Health Authority.
 Column totals do not agree with the Total due to missing DHAs in data and exclude Accounting adjustments and manual claims from Nursing Homes.

Special Funding Assistance Programs¹ for Residents Payment Summary Fiscal Years 1999/00 to 2003/04

						Percent Change					
Payment Summary	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04	
Cystic Fibrosis											
- drugs	841,515	812,094	769,634	817,818	852,869	12.4	(3.5)	(5.2)	6.3	4.3	
- equipment & emergency	<u>33,699</u>	<u>17,531</u>	14,002	<u>7,687</u>	14,924	<u>9.5</u>	<u>(48.0)</u>	(20.1)	<u>(45.1)</u>	<u>94.1</u>	
Subtotal Cystic Fibrosis	875,214	829,625	783,635	825,505	867,793	12.2	(5.2)	(5.5)	5.3	5.1	
Diabetes Insipidus	114,210	120,673	107,861	115,838	114,292	5.1	5.7	(10.6)	7.4	(1.3)	
Cancer	305,066	380,823	420,773	590,704	551,939	13.8	24.8	10.5	40.4	(6.6)	
Growth Hormone Deficiency	375,576	364,600	499,680	521,374	519,678	22.8	(2.9)	37.0	4.3	(0.3)	
Hemophiliac Assistance Program	17,639	11,472	27,801	24,739	37,486	(18.1)	(35.0)	142.3	(11.0)	51.5	
Other Drug Programs	171,999	194,815	300,448	320,924	343,503	151.2	13.3	54.2	6.8	7.0	
Total Special Assistance Programs	1,859,704	1,902,009	2,140,198	2,399,084	2,434,690	19.8	2.3	12.5	12.1	1.5	

¹ Data provided are based on 'date of service'.

Special Funding Assistance for Residents with Cystic Fibrosis Utilization Summary Fiscal Years 1999/00 to 2003/04

						Percent Change				
Program Expenditure ¹	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Drugs	841,515	812,094	769,634	817,818	852,869	12.4	(3.5)	(5.2)	6.3	4.3
Equipment	33,699	17,531	12,420	7,687	14,924	9.5	(48.0)	(29.2)	(38.1)	94.1
Total Program Expenditure	875,214	829,625	782,053	825,505	867,793	12.2	(5.2)	(5.7)	5.6	5.1
Utilization Summary										
Beneficiaries	154	154	148	151	148	(3.1)	0.0	(0.0)	0.0	(0.0)
Expenditure Per Beneficiary ²	5,464.38	5,273.34	5,200.23	5,416.01	5,762.63	16.0	(3.5)	(0.0)	0.0	0.1

¹ Data provided are based on 'date of service'.

² Per Beneficiary expenditure excludes dollar value for equipment.

Special Funding Assistance for Residents with Diabetes Insipidus Utilization Summary Fiscal Years 1999/00 to 2003/04

						Percent Change				
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Program Expenditure ¹	114,210	120,673	107,861	115,838	114,292	5.1	5.7	(10.6)	7.4	(1.3)
Utilization Summary										
Beneficiaries	69	70	63	69	60	7.8	1.4	(0.1)	0.1	(0.1)
Expenditure Per Beneficiary	1,655.22	1,723.90	1,712.08	1,678.81	1,904.86	(2.5)	4.1	(0.0)	(0.0)	0.1

¹ Data provided are based on 'date of service'.

Special Funding Assistance for Residents with Cancer Utilization Summary Fiscal Years 1999/00 to 2003/04

						Percent Change					
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04	
Program Expenditure ¹	305,066	380,823	420,773	590,704	551,939	13.8	24.8	10.5	40.4	(6.6)	
Utilization Summary											
Beneficiaries	366	368	305	370	380	5.2	0.5	(17.1)	21.3	2.7	
Expenditure Per Beneficiary	833.51	1,034.85	1,379.58	1,596.50	1,452.47	8.2	24.2	33.3	15.7	(9.0)	

¹ Data provided are based on 'date of service' .

Special Funding Assistance for Residents With Growth Hormone Deficiency Utilization Summary Fiscal Years 1999/00 to 2003/04

						Percent Change				
	1999/00	2000/01	2001/02	2002/03	2003/04	99/00	00/01	01/02	02/03	03/04
Program Expenditure ¹	375,576	364,600	499,680	521,374	519,678	22.8	(2.9)	37.0	4.3	(0.3)
Utilization Summary										
Beneficiaries	35	36	32	43	40	6.1	2.9	(0.1)	0.3	(0.1)
Expenditure Per Beneficiary	10,730.74	10,127.77	15,615.01	12,124.98	12,991.95	15.8	(5.6)	0.5	(0.2)	0.1

¹ Data provided are based on 'date of service'.