



MEDICAL SERVICES INSURANCE

Annual Statistical Tables

12 MONTHS ENDING MARCH 31, 2000

(with comparative statistics for previous years)

PREPARED BY

HEALTH ECONOMICS

Insured Programs Branch Nova Scotia Department of Health

(September 2001)

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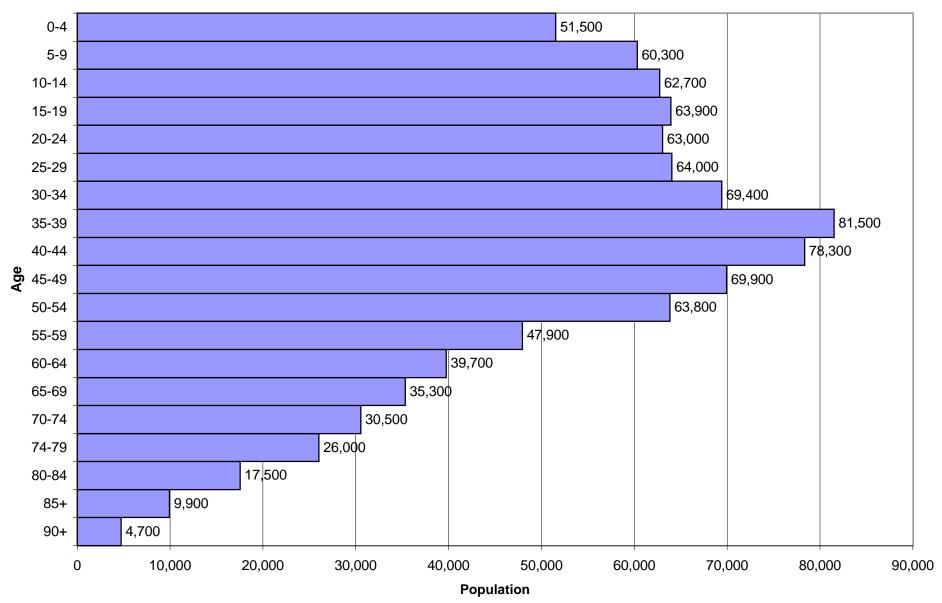
Insured Programs Branch

Section One

Population Data

Nova Scotia Department of Health - Figure 1

Population By 5 Year Age Groups as of July 1, 1999



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

							Percent	Change	
Age Group	1995	1996	1997	1998	1999	1996	1997	1998	1999
Total	927,700	931,200	934,800	934,600	939,800	0.4	0.4	(0.0)	0.6
0 - 4	58,300	57,000	55,200	53,400	51,500	(2.2)	(3.2)	(3.3)	(3.6)
5 - 9	62,300	62,500	62,200	61,900	60,300	0.3	(0.5)	(0.5)	(2.6)
10 - 14	62,400	62,600	63,000	62,500	62,700	0.3	0.6	(8.0)	0.3
15 - 19	63,800	63,400	63,200	63,100	63,900	(0.6)	(0.3)	(0.2)	1.3
20 - 24	65,800	64,900	63,800	62,200	63,000	(1.4)	(1.7)	(2.5)	1.3
25 - 29	67,100	65,600	64,900	63,700	64,000	(2.2)	(1.1)	(1.8)	0.5
30 - 34	81,300	78,900	76,000	72,100	69,400	(3.0)	(3.7)	(5.1)	(3.7)
35 - 39	79,100	80,100	81,000	81,300	81,500	1.3	1.1	0.4	0.2
40 - 44	71,700	73,200	75,300	76,900	78,300	2.1	2.9	2.1	1.8
45 - 49	66,400	68,500	68,500	68,700	69,900	3.2	0.0	0.3	1.7
50 - 54	50,700	53,000	57,100	60,700	63,800	4.5	7.7	6.3	5.1
55 - 59	41,600	42,700	44,100	46,000	47,900	2.6	3.3	4.3	4.1
60 - 64	38,100	38,200	38,400	38,900	39,700	0.3	0.5	1.3	2.1
65 - 69	34,400	34,600	35,000	35,100	35,300	0.6	1.2	0.3	0.6
70 - 74	31,200	30,900	30,600	30,500	30,500	(1.0)	(1.0)	(0.3)	0.0
75 - 79	24,500	25,200	25,800	26,000	26,000	2.9	2.4	8.0	0.0
80 - 84	16,600	17,000	17,300	17,500	17,500	2.4	1.8	1.2	0.0
85 - 89	8,100	8,600	9,100	9,600	9,900	6.2	5.8	5.5	3.1
90+	4,300	4,300	4,300	4,500	4,700	0.0	0.0	4.7	4.4

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

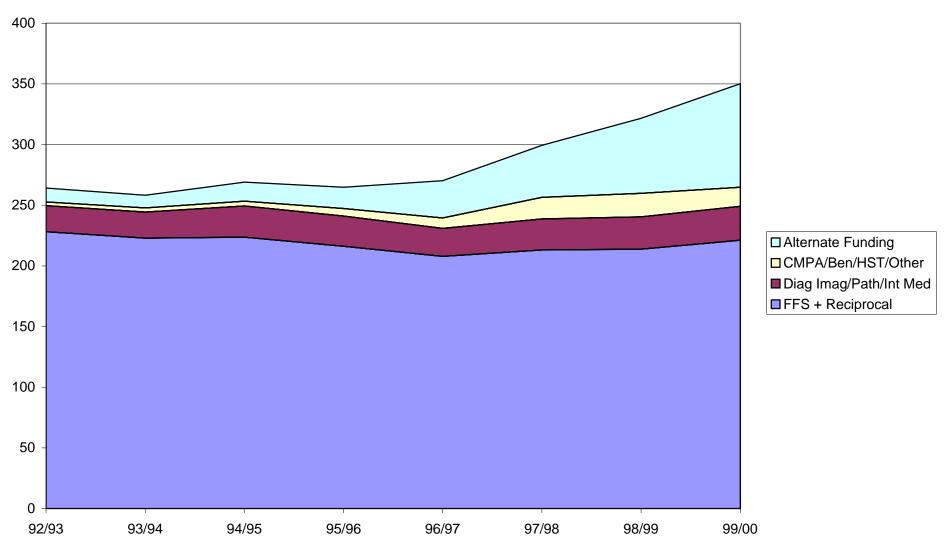


Insured Programs Branch

Section Two

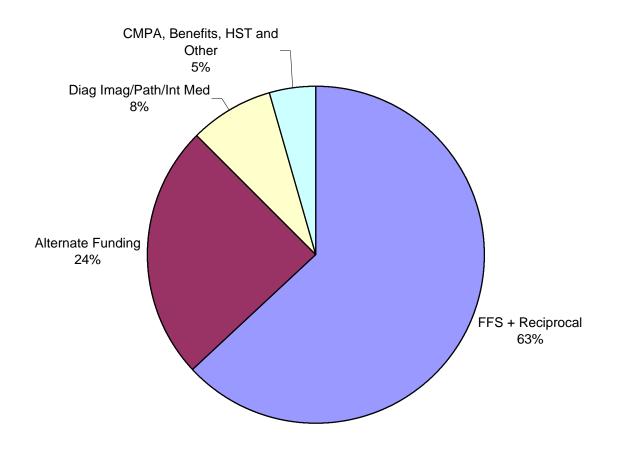
Actual Financial Payments to Physicians

Actual Financial Payments to Physicians Nova Scotia, 1992/93 to 1999/00 (Current Dollars)



Source: Insured Programs Branch NS Department of Health 2000

Actual Financial Payments to Physicians, By Use of Funds Nova Scotia, 99/00 (Current Dollars)



Medical Payments Financial Report¹

	Actuals	Actuals	Actuals	Actuals	Actuals		Perc	ent Cha	nge
Payment Type	95/96	96/97	97/98	98/99	99/00	96/97	97/98	98/99	99/00
Fee for Service and Reciprocal									
Fee for Service	212,646,691	203,879,956	208,524,567	209,637,655	216,781,802	(4.1)	2.3	0.5	3.4
Reciprocal Billing	3,561,755	3,910,000	4,552,672	4,153,879	4,441,830	9.8	16.4	(8.8)	6.9
Subtotal	216,208,446	207,789,956	213,077,239	213,791,534	221,223,632	(3.9)	2.5	0.3	3.5
Diag Image/Path Rad/Int Med	24,840,296	23,100,355	25,611,624	26,654,669	27,885,214	(7.0)	10.9	4.1	4.6
Alternate Funding									
Alternate Funding	17,563,113	30,676,120	34,392,243	53,120,794	76,283,865	74.7	12.1	54.5	43.6
Rural Stabilization			8,450,000	8,786,000	9,016,601			4.0	2.6
Subtotal	17,563,113	30,676,120	42,842,243	61,906,794	85,300,466	74.7	39.7	44.5	37.8
CMPA, Benefits, HST and Other									
Benefits	3,081,600	3,081,569	3,500,000	3,621,740	2,172,897	(0.0)	13.6	3.5	(40.0)
CMPA	2,637,120	3,000,000	4,200,742	5,148,482	5,150,000	13.8	40.0	22.6	0.0
Managed Care Initiatives	501,000	2,530,000	4,122,000	2,953,438	0	405.0	62.9	(28.3)	(100.0)
HST Rebate			5,933,057	6,745,071	7,052,297			13.7	4.6
Consultant's Fund			35,054	47,263	74,939			34.8	58.6
Reentry Program				671,661	1,365,366				103.3
NS CME Community Network				138,500	138,500				0.0
Subtotal	6,219,720	8,611,569	17,790,853	19,326,155	15,953,999	38.5	106.6	8.6	(17.4)
Grand Total	264,831,575	270,178,000	299,321,959	321,679,152	350,363,311	2.0	10.8	7.5	8.9

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.



Insured Programs Branch

Section Three

Statistical Data

Summary of Payments¹

							Percent	Change	
	1995/96²	1996/97²	1997/98³	1998/99³	1999/00³	1996/97	1997/98	1998/99	1999/00
Total	351,835,932	365,101,875	393,953,649	431,896,708	467,887,282	3.8	7.9	9.6	8.3
Physicians' Services	262,979,889	267,449,785	292,910,458	318,339,684	350,177,455	1.7	9.5	8.7	10.0
Dental Services	10,840,984	10,169,444	8,207,374	9,748,680	10,102,628	(6.2)	(19.3)	18.8	3.6
Optometric Services	1,715,456	1,819,415	1,481,107	1,740,978	1,869,203	6.1	(18.6)	17.5	7.4
Prescription Drugs⁴	75,178,597	84,788,321	90,589,242	101,046,160	104,852,982	12.8	6.8	11.5	3.8
Prosthetic Services	1,121,006	874,910	765,468	1,021,206	885,014	(22.0)	(12.5)	33.4	(13.3)

¹ Data provided are 'date of payment' for years 1995/96 and 1996/97. Data beginning in 1997/98 are 'date of service' except Dental. Dental date of service data began in 1999/00.

² Includes CMPA and Benefit Fund

³ Includes CMPA, Benefit Fund, Rural Stabilization, Emergency Room III, and miscellaneous accounting adjustments.

⁴ MSI Pharmacare includes Professional Fee and Drug Cost. This includes both the Department of Health expenditures and Seniors' contributions.



Insured Programs Branch

Section Four

Physicians' Services

Physicians' Services¹ Payment Summary by Date of Service

				Percent Change		
Payment Summary	1997/98	1998/99	1999/00	98/99	99/00	
Fee-for-Service						
NS Resident, NS Physician	207,695,808	210,496,326	218,275,145	1.3	3.7	
NS Resident, Non NS Physician	4,456,225	4,739,355	4,914,892	6.4	3.7	
Total Fee-for-Service	212,152,033	215,235,681	223,190,037	1.5	3.7	
Alternate Funding						
Fixed Periodic Payment - Individual	6,336,113	5,954,323	7,979,754	(6.0)	34.0	
Fixed Periodic Payment - Group	8,685,885	18,765,974	38,898,445	116.1	107.3	
Sessional	1,243,813	1,064,670	1,477,800	(14.4)	38.8	
Psychiatric	12,998,286	13,774,760	13,835,010	6.0	0.4	
Emergency Room Level III	8,979,692	11,819,432	13,105,276	31.6	10.9	
Rural Stabilization (A, B, C)	8,172,354	9,190,775	9,004,996	12.5	(2.0)	
Total Alternate Funding	46,416,143	60,569,934	84,301,280	30.5	39.2	
Non Patient Specific (NPS)						
Diagnostic Imaging	18,525,579	19,608,793	21,497,994	5.8	9.6	
Pathology	3,203,783	3,499,036	3,680,837	9.2	5.2	
Internal Medicine	3,597,719	3,738,754	2,641,838	3.9	(29.3)	
Total Non Patient Specific	25,327,082	26,846,583	27,820,670	6.0	3.6	
Other Payments						
HST	5,588,614	6,382,145	7,004,081	14.2	9.7	
Benefit Fund	3,400,000	3,621,740	2,172,897	6.5	(40.0)	
CMPA	4,200,742	5,148,482	5,150,000	22.6	0.0	
Miscellaneous Adjustments	(4,174,155)	535,119	538,490	112.8	0.6	
Total Other Payments	9,015,201	15,687,486	14,865,468	74.0	(5.2)	
Total Physician Payments	292,910,458	318,339,684	350,177,455	8.7	10.0	

¹ Data provided are 'date of service'.

Total Payments¹ for Physicians' Services² and Expenditure Per Insured Person Fiscal Years 1990/91 to 1999/00

Year	Total Paid	Expenditure per	Percentage Change
		Insured Person	from Previous Year
1999/00 ⁴	\$350,177,455	\$372.61	9.4
1998/99⁴	318,339,684	340.62	8.7
1997/98 ⁴	292,910,458	313.34	9.3
1996/97³	267,449,785	286.81	0.4
1995/96 ³	262,979,889	285.69	0.3
1994/95	262,405,345	284.73	2.9
1993/94	252,050,274	276.73	3.9
1992/93	238,653,399	266.38	(2.4)
1991/92	243,154,365	272.87	4.4
1990/91	230,788,291	261.34	6.0

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

Includes physicians' services payments for Salaried/Sessional and effective April 1, 1993 includes Diagnostic Imaging and Internal Medicine. Pathology was included effective June 1993.

³ Includes CMPA and Benefit Fund.

⁴ Includes CMPA, Benefit Fund, Rural Stabilization, Emergency Room Level III and miscellaneous accounting adjustments.

Physicians' Services¹ Number of Physicians Paid² Fiscal Year April 1, 1999 - March 31, 2000

Payment Category	Number of Physicians
Fee-for Service payments only	752
Physicians receiving only one type of Alternate Funding	377
Fee-for Service with other combinations of payment types	802
Total Physicians receiving Payments	1,931

¹ Data provided are 'date of service'.

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

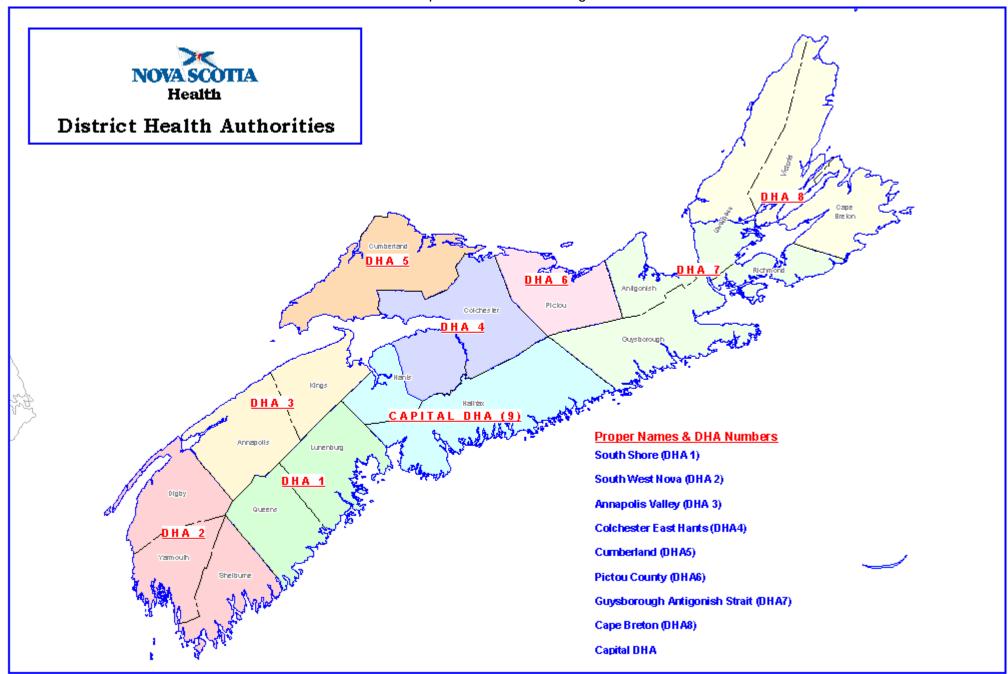
Utilization Summary of Physicians' Services by Date of Service Fiscal Years 1997/98, 1998/99, 1999/00

Utilization Summary				Percent	Change
	1997/98	1998/99	1999/00	1998/99	1999/00
Total Payments for Physicians' Services	292,863,898	317,643,393	350,177,455	8.5	10.2
Total Services	8,379,306	8,448,287	8,852,873	0.8	4.8
Insured Population ²	934,800	934,600	939,800	(0.0)	0.6
Total Registered by MSI	933,345	937,619	944,519	0.5	0.7
Services per Insured	8.96	9.04	9.42	0.8	4.2
Expenditure per Insured	313.29	339.87	372.61	8.5	9.6
Total Beneficiaries³receiving Insured Services	788,619	788,780	791,288	0.0	0.3
Percent of Beneficiaries ³ to Insured Population	84.4	84.4	84.2	0.0	(0.2)
Services per Beneficiary ³	8.67	8.68	9.08	0.1	4.6
Expenditure per Beneficiary ³	339.25	368.67	407.38	8.7	10.5

¹ Data provided are 'date of service'.

² Insured Population from Statistics Canada's population data as of July 1st each year.

³ Excludes Non-Patient Specific (Diagnostic Imaging, Pathology, Internal Medicine) beneficiaries and payments as these claims are submitted in bulk; no demographic data area available.



Physicians¹¹ Gross Payments **District Health Authority by Date of Service** Fiscal Years 1997/98, 1998/99, 1999/00

		1997/98 ²		1998/99 ²			1999/00		
District Health Authority	No. of	Amount	Average Paid	No. of	Amount	Average Paid	No. of	Amount	Average Paid
	Physicians	Paid	Per Physician	Physicians	Paid	Per Physician	Physicians	Paid	Per Physician
1 - South Shore	87	12,815,376	147,303	85	13,862,942	163,093	92	16,199,456	176,081
2 - South West Nova	72	14,351,137	199,321	78	14,756,772	189,189	81	16,186,487	199,833
3 - Annapolis Valley	135	21,856,436	161,900	137	22,688,478	165,609	131	25,714,163	196,291
4 - Colchester East Hants	86	13,974,578	162,495	91	15,514,220	170,486	95	17,346,135	182,591
5 - Cumberland	51	6,488,792	127,231	45	6,276,668	139,482	45	8,519,434	189,321
6 - Pictou County	68	12,528,863	184,248	75	12,450,571	166,008	67	12,672,547	189,142
7 - Guysborough Antigonish Strait	65	11,575,650	178,087	68	12,924,586	190,067	72	15,149,454	210,409
8 - Cape Breton	210	39,344,374	187,354	221	40,648,314	183,929	216	46,736,050	216,371
9 - Capital	1,020	142,885,523	140,084	1,009	142,751,644	141,478	1089	176,065,907	161,677
Locums	16	984,390	61,524	24	1,588,736	66,197	43	1,947,854	45,299
Total	1,810	276,805,119	152,931	1,833	283,462,932	154,644	1,931	336,537,487	174,281

¹ Includes Fee-for-Service, Fixed Periodic Payments/Sessional, Pathology/Radiology/Internal Medicine Contracts, ER3 payments and Alternate Funded grd ² Excludes payments for Alternate Funded Groups.

District Health Authority Distribution of Gross Payments¹ by Functional Specialty Fiscal Year April 1, 1999 - March 31, 2000

	G	Seneral Practi	ice	Specialists ²			Total		
District Health Authority	No. of	Payments	Average Per	No. of	Payments	Average Per	No. of	Payments	Average Per
	Physicians		Physician	Physicians		Physician	Physicians		Physician
1 - South Shore	56	9,173,308	163,809	36	7,026,148	195,171	92	16,199,456	176,081
2 - South West Nova	46	8,862,959	192,673	35	7,323,528	209,244	81	16,186,487	199,833
3 - Annapolis Valley	70	11,218,702	160,267	61	14,495,461	237,631	131	25,714,163	196,291
4 - Colchester East Hants	50	8,570,227	171,405	45	8,775,908	195,020	95	17,346,135	182,591
5 - Cumberland	28	5,156,026	184,144	17	3,363,408	197,848	45	8,519,434	189,321
6 - Pictou County	30	5,798,543	193,285	37	6,874,004	185,784	67	12,672,547	189,142
7 - Guysborough Antigonish Strait	38	8,327,259	219,138	34	6,822,195	200,653	72	15,149,454	210,409
8 - Cape Breton	102	19,942,391	195,514	114	26,793,659	235,032	216	46,736,050	216,371
9 - Capital	386	50,248,751	130,178	703	125,817,157	178,972	1089	176,065,907	161,677
Locums	23	1,118,790	48,643	20	829,064	41,453	43	1,947,854	45,299
Total	829	128,416,955	154,906	1102	208,120,531	188,857	1,931	336,537,487	174,281

Data provided are 'date of service'.
 Includes Palliative Care and Others.

Distribution of Physicians by Functional Specialty and Payment Range¹ Fiscal Year April 1, 1999 - March 31, 2000

Specialty	Under	\$25,000 -	\$50,000 -	\$100,000 -	\$150,000 -	\$200,000 -	\$250,000 -	\$300,000 -	\$400,000 -			
	\$25,000	\$49,999.99	\$99,999.99	\$149,999.99	\$199,999.99	\$249,999.99	\$299,999.99	\$399,999.99	\$499,999.99	500,000+	Unknown ²	Total
Anaesthesia	11	7	13	14	25	17	11	4			10	112
Dermatology				2		1	5	2		1	1	12
Emergency Med	11	2	15	20	14	3						65
Gen. Practice	98	54	102	153	176	138	65	30	9	1	6	832
Gen. Surgery	8	2	3	5	5	7	11	10	8	2	1	62
Geriatrics											7	7
Int. Medicine	11	10	8	8	6	17	13	13	5	3	89	183
Neurology	1		1	1	1	3		1			10	18
Neurosurgery	5										2	7
Obs & Gyn	4	3	5	7	4	6	7	9	3	3		51
Ophthalmology	5		2	1	6	3	5	13	8	8		51
Orthopaedic Surg	7		1	1	2		3	10	3	2		29
Otolaryngology	2	1	2	7	3	1	2	3	3		1	25
Paediatrics	10	2	6	10	7	4	3	1			40	83
Pathology	5	10	19	7	2	4						47
Physical Med.	1	1	3		1	1	1				6	14
Plastic Surgery			1	1	2	2	2	1	1	1		11
Psychiatry	16	14	29	43	44	10	5		3			164
Radiology	15	8	5	4	1	8	11	27	16	1	8	104
Thoracic Surgery							2	4	1	1		8
Urology	1		2		2	2	6	4	1	3		21
Vascular Surg					1				4			5
Other ³	12	4	1	1	1						1	20
NOVA SCOTIA	223	118	218	285	303	227	152	132	65	26	182	1,931

Data provided are 'date of service', using gross payments.
 Unknown are Physicians receiving Specialty Block Funded payments only
 Includes Palliative Care and physicians whose primary function is not a clinical function.

Physician Services Fee-For-Service Payments¹ Number of Services² by Type of Service

	1997/98		1998/99		1999/00		Percent Change	
	No. of	% of	No. of	% of	No. of	% of		
	Services	Total	Services	Total	Services	Total	1998/99	1999/00
Consultations	437,476	6.4	448,719	6.6	450,224	6.3	2.6	0.3
Office Visits	3,656,565	53.5	3,671,013	53.6	3,630,304	50.5	0.4	(1.1)
Home Visits	57,318	0.8	50,924	0.7	47,834	0.7	(11.2)	(6.1)
Nursing Home Visits	92,131	1.3	88,955	1.3	88,176	1.2	(3.4)	(0.9)
Hospital Visits	583,261	8.5	583,826	8.5	576,328	8.0	0.1	(1.3)
Other Visits	404	<0.1	366	<0.1	293	<0.1	(9.4)	(19.9)
Emergency & Out-Patient Dept. Visit	567,370	8.3	575,779	8.4	554,577	7.7	1.5	(3.7)
Intensive/Critical Care	62,907	0.9	60,627	0.9	59,583	8.0	(3.6)	(1.7)
Psychiatric Services	157,684	2.3	151,981	2.2	144,006	2.0	(3.6)	(5.2)
Subtotal	5,615,116	82.1	5,632,190	82.2	5,551,325	77.2	0.3	(1.4)
Eye Examinations	33,857	0.5	35,324	0.5	36,907	0.5	4.3	4.5
Other Diag. & Therapeutic	770,383	11.3	766,744	11.2	664,388 ³	9.2	(0.5)	(13.3)
Subtotal	804,240	11.8	802,068	11.7	701,295	9.8	(0.3)	(12.6)
Obstetrical Care	100,885	1.5	96,019	1.4	92,820	1.3	(4.8)	(3.3)
Major Surgery	83,890	1.2	85,369	1.2	87,673	1.2	1.8	2.7
Minor Surgery	98,246	1.4	99,204	1.4	97,375	1.4	1.0	(1.8)
Surgical Assist	17,751	0.3	18,342	0.3	18,038	0.3	3.3	(1.7)
Anaesthesia	88,367	1.3	88,176	1.3	87,539	1.2	(0.2)	(0.7)
Subtotal	389,139	5.7	291,091	4.3	290,625	4.0	(25.2)	(0.2)
All Other Services ⁴	29,394	0.4	27,608	0.4	551,613 ⁵	7.7	(6.1)	1,898.0
Total Fee-for-Service	6,837,889	100.0	6,848,976	100.0	7,187,678	100.0	0.2	4.9
Pay Patient ⁶	7,141		8,226		7,172		15.2	(12.8)
Grand Total	6,845,030		6,857,202		7,194,850		0.2	4.9

¹ Data provided are 'date of service'.

² Service counts include Shadow Services.

³ Decrease in 1999/00 due to introduction of a specific fee code for Provincial Immunization Injections.

⁴ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management.

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

⁶ Includes Out-of-Country and Quebec services for Nova Scotia residents.

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

	1997/98		1998/99		1999/00		Percent Change	
	Amount Paid	% of	Amount Paid	% of	Amount Paid	% of		
		Total		Total		Total	1998/99	1999/00
Consultations	30,085,958	14.5	31,162,875	14.8	29,180,677	13.5	3.6	(6.4)
Office Visits	68,851,245	33.2	71,644,254	34.1	78,829,712	36.4	4.1	10.0
Home Visits	2,109,504	1	1,914,537	0.9	1,807,434	8.0	(9.2)	(5.6)
Nursing Home Visits	1,764,134	0.9	1,763,844	0.8	1,777,214	0.8	0.0	0.8
Hospital Visits	9,717,752	4.7	9,481,815	4.5	12,458,369	5.7	(2.4)	31.4
Other Visits	12,981	<0.1	12,470	<0.1	11,817	<0.1	(3.9)	(5.2)
Emergency & Out-Patient Dept. Visit	5,607,255	2.7	3,805,818	1.8	3,287,688	1.5	(32.1)	(13.6)
Intensive/Critical Care	5,046,381	2.4	4,823,584	2.3	4,210,531	1.9	(4.4)	(12.7)
Psychiatric Services	10,604,794	5.1	10,472,306	5.0	10,331,875	4.8	(1.2)	(1.3)
Subtotal	133,800,003	64.5	135,081,503	64.2	141,895,316	65.4	1.0	5.0
Eye Examinations	1,183,181	0.6	1,276,537	0.6	1,349,468	0.6	7.9	5.7
Other Diagnostic & Therapeutic	21,038,229	10.1	21,283,235	10.1	17,177,309	7.9	1.2	(19.3)
Subtotal	22,221,410	10.7	22,559,772	10.7	18,526,777 ²	8.5	1.5	(17.9)
Obstetrical Care	7,089,475	3.4	7,064,821	3.4	7,129,337	3.3	(0.3)	0.9
Major Surgery	24,301,923	11.7	25,994,248	12.4	26,968,215	12.4	7.0	3.7
Minor Surgery	3,364,138	1.6	3,400,416	1.6	3,384,876	1.6	1.1	(0.5)
Surgical Assist	1,616,134	0.8	1,760,834	0.8	1,992,259	0.9	9.0	13.1
Anaesthesia	13,014,030	6.3	12,218,656	5.8	11,532,020	5.3	(6.1)	(5.6)
Subtotal	42,296,225	20.4	43,374,154	20.6	43,877,370	20.2	2.5	1.2
All Other Services ³	2,099,619	1.0	2,192,182	1.0	5,408,941 4	2.5	4.4	146.7
Total Fee-for-Service	207,506,731	100.0	210,272,432	100.0	216,837,742	100.0	1.3	3.1
Pay Patient⁵	275,956		333,304		305,506		20.8	(8.3)
Grand Total	207,782,687		210,605,736		217,143,248		20.8	3.1

Data provided are 'date of service'.

² Decrease in 1999/00 due to introduction of a specific fee code for Provincial Immunization Injections.

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

Physicians Services Fee-For-Service Payments¹ Services Per 1,000 Insured Persons²

	Number of	Percent Change			
	1997/98	1998/99	1999/00	1998/99	1999/00
Consultations	468	480	479	2.6	(0.2)
Office Visits	3,912	3,928	3863	0.4	(1.7)
Home Visits	61	54	51	(11.5)	(5.6)
Nursing Home Visits	99	95	94	(4.0)	(1.1)
Hospital Visits	624	625	613	0.2	(1.9)
Other Visits	<0.1	<0.1	<0.1		
Emergency & Out-Patient Dept. Visit	607	616	590	1.5	(4.2)
Intensive/Critical Care	67	65	63	(3.0)	(2.5)
Psychiatric Services	169	163	153	(3.6)	(5.9)
Subtotal	6,007	6,026	5,907	0.3	(2.0)
Eye Examinations	36	38	39	5.6	2.6
Other Diagnostic & Therapeutic	824	820	707	(0.5)	(13.8)
Subtotal	860	858	746	(0.2)	(13.1)
Obstetrical Care	108	103	99	(4.6)	(3.9)
Major Surgery	90	91	93	1.1	2.2
Minor Surgery	105	106	104	1.0	(1.9)
Surgical Assist	19	20	19	5.3	(5.0)
Anaesthesia	95	94	93	(1.1)	(1.1)
Subtotal	309	311	309	0.6	(0.6)
All Other Services ⁴	31	30	587 ⁵	(3.2)	1,856.7
TOTAL ⁶	7,315	7,328	7,648	0.2	4.4

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.

³ Service counts include Shadow Services.

⁴ Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, and non-obstetrical pain management

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

⁶ Columns may not add to totals and subtotals due to rounding.

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

	Amount F	Paid Per 1,000	Insured	Percent C	hange
	1997/98	1998/99	1999/00	1998/99	1999/00
Consultations	32,184	33,237	31,050	3.3	(6.6)
Office Visits	73,653	76,412	83,879	3.7	9.8
Home Visits	2,257	2,042	1,923	(9.5)	(5.8)
Nursing Home Visits	1,887	1,881	1,891	(0.3)	0.5
Hospital Visits	10,396	10,113	13,256	(2.7)	31.1
Other Visits	14	13	13	(7.1)	(3.3)
Emergency & Out-Patient Dept. Visit	5,999	4,059	3,498	(32.3)	(13.8)
Intensive/Critical Care	5,399	5,145	4,480	(4.7)	(12.9)
Psychiatric Services	11,344	11,169	10,994	(1.5)	(1.6)
Subtotal	143,132	144,072	150,985	0.7	4.8
Eye Examinations	1,266	1,361	1,436	7.5	5.5
Other Diagnostic & Therapeutic	22,506	22,700	18,278	0.9	(19.5)
Subtotal	23,771	24,061	19,714	1.2	(18.1)
Obstetrical Care	7,584	7,535	7,586	(0.6)	0.7
Major Surgery	25,997	27,724	28,696	6.6	3.5
Minor Surgery	3,599	3,627	3,602	0.8	(0.7)
Surgical Assist	1,729	1,878	2,120	8.6	12.9
Anaesthesia	13,922	13,032	12,271	(6.4)	(5.8)
Subtotal	45,246	46,261	46,688	2.2	0.9
All Other Services ³	2,246	2,338	5,755 4	4.1	146.2
TOTAL ⁵	221,980	224,267	230,728	1.0	2.9

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.

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 1999/00

	Insured ²	Ex	penditure Per Ins	ured
Age Group	Population	Male	Female	Total
0 - 4	51,500	184.57	169.03	177.09
5 - 9	60,300	94.75	86.24	90.64
10 - 14	62,700	69.57	68.17	68.93
15 - 19	63,900	74.09	140.34	106.44
20 - 24	63,000	66.46	209.47	137.19
25 - 29	64,000	74.42	270.00	173.30
30 - 34	69,400	94.67	265.93	181.15
35 - 39	81,500	114.10	237.10	176.05
40 - 44	78,300	137.75	230.65	184.45
45 - 49	69,900	174.02	245.81	210.13
50 - 54	63,800	217.59	285.19	251.56
55 - 59	48,000	283.99	315.96	299.89
60 - 64	39,700	348.49	353.98	351.57
65 - 69	35,300	488.74	449.75	468.65
70 - 74	30,500	597.81	530.24	560.17
75+	58,000	717.07	600.77	643.34
Total	939,800	191.55	268.44	230.73

¹ Data provided are 'date of service'.

² Insured population from Statistics Canada new estimates, as of July 1, 1999, include Armed Forces and R.C.M.P personnel.

Fee-for-Service Payments for Physicians' Services¹ Expenditure Per Insured Person by District Health Authority of Patient Residence Fiscal 1999/00

		Expenditure Per Insured Person					
District Health Authority	Persons	General	Specialists	Total			
of Patient	Insured ²	Practitioners					
1 - South Shore	61,200	124.05	115.42	\$239.47			
2 - South West Nova	65,500	114.74	107.18	221.92			
3- Annapolis Valley	84,700	111.86	106.97	218.82			
4 - Colchester East Hants	72,500	102.93	113.04	215.98			
5 - Cumberland	34,100	86.03	108.37	194.39			
6 - Pictou County	49,200	89.77	106.25	196.03			
7 - Guysborough Antigonish Strait	41,600	121.09	132.69	253.78			
8 - Cape Breton	145,700	112.61	138.30	250.91			
9 - Capital	385,300	105.75	112.08	217.83			
TOTAL	939,800	110.18 ³	118.31 ³	\$230.73 ⁴			

¹ Data provided are 'date of service'.

Insured Population from Statistics Canada new estimates, as of July 1, 1999, include Armed Forces and RCMP personnel.

³ Excludes an 'Unknown' amount which cannot be broken out by specialty.

⁴ Includes the 'Unknown' amount of \$6,136,203.

Fee-for-Service Payments for Physicians' Services¹ Utilization Data and Expenditure Per Patient by District Health Authority of Patient Residence Fiscal 1999/00

District Health Authority of Patient	Number of Persons Insured ²	Number of Beneficiaries	Utilization Rate	Expenditure Per Beneficiary
1 - South Shore	61,200	49,725	81.3	294.74
2 - South West Nova	65,500	52,584	80.3	276.43
3- Annapolis Valley	84,700	67,717	79.9	273.70
4 - Colchester East Hanta	72,500	52,219	72.0	299.86
5 - Cumberland	34,100	24,805	72.7	267.24
6 - Pictou County	49,200	39,887	81.1	241.79
7 - GuysboroughAntigonish Stait	41,600	31,627	76.0	333.80
8 - Cape Breton	145,700	119,691	82.1	305.43
9 - Capital	385,300	316,762	82.2	264.96
TOTAL	939,800	754,394 ³	80.3	287.43

¹ Data provided are 'date of service'.

² Insured Population, from Statistics Canada newest estimates, as of July 1 1999, include Armed Forces and RCMP.

³ Total is unique Fee-for-Service beneficiary count. Total by DHA does not add to unique total as beneficiaries may be counted in more than one DHA or 'Unknown' DHA.



Insured Programs Branch

Section Five

Dental Programs

Dental Programs Payment Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Payment Summary ²	1997/98	1998/99	1999/00	1998/99	1999/00
Children's Oral Health Program	6,100,705	7,109,061	6,963,583	16.5	(2.0)
Dental Surgical Program	1,514,346	1,725,024	1,929,519	13.9	11.9
Out-of-province	965	1,622	819	68.1	(49.5)
IWK Alternate Group Funding ³		217,073	468,363	n/a	115.8
Subtotal Dental Programs	7,616,016	9,052,780	9,362,284	18.9	3.4
Special Dental Programs					
Maxillofacial Prosthodontics	264,129	321,207	311,835	21.6	(2.9)
Cleft Palate	226,249	243,794	236,850	7.8	(2.8)
Mentally Challenged	63,998	89,766	86,985	40.3	(3.1)
Sir Frederick Fraser School	409	2	2	(99.5)	0.0
Special Considerations - Adult	36,573	41,131	40,231	12.5	(2.2)
Subtotal Special Dental Programs	591,358	695,899	675,903	17.7	(2.9)
Total Dental Payments	8,207,374	9,748,680	10,038,187	18.8	3.0

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'

² Totals include Dental Retroactive payments.

³ IWK Dental Alternate Funding Program began in 1998/99.

Children's Oral Health Program Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	263,845	298,557	283,978	13.2	(4.9)
Amount Paid ²	6,100,705	7,109,061	6,963,583	16.5	(2.0)
Persons Insured	117,400	115,300	111,843	(1.8)	(3.0)
Persons Receiving Insured Services (Beneficiaries)	64,017	65,459	64,375	2.3	(1.7)
Services Per Insured Person Paid per Insured Person	2.2 51.97	2.6 61.66	2.5 62.26	15.2 18.7	(1.9) 1.0
Services Per Beneficiary Paid Per Beneficiary	4.1 95.30	4.6 108.60	4.4 108.17	10.7 14.0	(3.3) (0.4)

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.
² Totals include Dental Retroactive payments.

Dental Surgical Program Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	15,549	16,909	19,422	8.7	14.9
Amount Paid ²	1,514,346	1,725,024	1,929,519	13.9	11.9
Persons Insured	934,800	934,600	939,800	(0.0)	0.6
Persons Receiving Insured Services (Beneficiaries)	8,655	9,224	9,664	6.6	4.8
Services Per Insured Person Paid per Insured Person	0.02 1.62	0.02 1.85	0.02 2.05	8.8 13.9	14.2 11.2
Services Per Beneficiary Paid Per Beneficiary	1.8 174.97	1.8 187.01	2.0 199.66	2.0 6.9	9.6 6.8

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.

² Totals include Dental Retroactive payments.

Special Dental Program - Maxillofacial Prosthodontics Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	1,366	1,549	1,622	13.4	4.7
Amount Paid ²	264,129	321,207	368,316	21.6	14.7
Persons Receiving Insured Services (Beneficiaries)	425	634	583	49.2	(8.0)
Services Per Beneficiary	3.2	2.4	2.8	(24.0)	13.9
Paid Per Beneficiary	621.48	506.64	631.76	(18.5)	24.7

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.
² Totals include Dental Retroactive payments.

Special Dental Program - Cleft Palate Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	3,029	3,019	2,146	(0.3)	(28.9)
Amount Paid ²	226,249	243,794	236,850	7.8	(2.8)
Persons Receiving Insured Services (Beneficiaries)	404	393	443	(2.7)	12.7
Comisso Der Deneficient	7.5	7.7	4.0	2.5	(20.0)
Services Per Beneficiary Paid Per Beneficiary	7.5 560.02	7.7 620.34	4.8 534.65	2.5 10.8	(36.9) (13.8)

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.
² Totals include Dental Retroactive payments.

Special Dental Program - Mentally Challenged Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	1,368	1,564	1,469	14.3	(6.1)
Amount Paid ²	63,998	89,766	85,341	40.3	(4.9)
Persons Receiving Insured Services (Beneficiaries)	192	196	210	2.1	7.1
Services Per Beneficiary	7.1	8.0	7.0	12.0	(12.3)
Paid Per Beneficiary	333.32	457.99	406.39	37.4	(11.3)

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.
² Totals include Dental Retroactive payments.

Special Dental Program - Special Considerations Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Utilization Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Services Rendered	222	260	204	17.1	(21.5)
Amount Paid ²	36,573	41,131	54,217	12.5	31.8
Persons Receiving Insured Services (Beneficiaries)	27	31	38	14.8	22.6
Services Per Beneficiary	8.2	8.4	5.4	2.0	(36.0)
Paid Per Beneficiary	1,354.56	1,326.81	1,426.76	(2.0)	7.5

¹ Data provided for 1997/98 and 1998/99 are 'date of payment'. Data provided for 1999/00 are 'date of service'.
² Totals include Dental Retroactive payments.



Insured Programs Branch

Section Six

Optometric Services

Optometric Services Payment and Utilization Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Payment Summary	1997/98	1998/99	1999/00	1998/99	1999/00
Fee-for-Service Payments	1,481,070	1,740,844	1,869,203	17.5	7.4
Pay Patient	36	134	0	272.9	(100.0)
Total	1,481,106	1,740,978	1,869,203	17.5	7.4
Utilization Summary					
Services Rendered	46,555	52,288	54,850	12.3	4.9
Persons Insured ²	934,800	934,600	939,800	(0.0)	0.6
Persons Receiving Services (Beneficiaries)	44,199	48,904	52,354	10.6	7.1
Percentage of Persons Insured	4.7	5.2	5.6	10.7	6.5
Services per 1,000 Insured	50	56	58	12.3	4.3
Expenditure per 1,000 Insured	1,584	1,863	1,989	17.6	6.8
Services per 1,000 Beneficiaries	1,053	1,069	1,048	1.5	(2.0)
Expenditure per 1,000 Beneficiaries	33,510	35,600	35,703	6.2	0.3

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



Insured Programs Branch

Section Seven

Prosthetic Programs

Prosthetic Programs Payment Summary¹ Fiscal Years 1997/98, 1998/99, 1999/00

				Percent Chang	
Payment Summary	1997/98 ²	1998/99	1999/00	1998/99	1999/00
Breast		136,074	141,101	n/a	3.7
Limb		821,498	689,208	n/a	(16.1)
Ocular		63,394	54,704	n/a	(13.7)
Exceptional Considerations		240	0	n/a	n/a
Total Prosthetic Programs Payments	1,271,845	1,021,206	885,014	(19.7)	(13.3)

Data provided are 'date of service'.
 Only total program 'date of payment' data available for 1997/98.

Prosthetic Programs - Breast Prostheses Utilization Summary Fiscal Years 1998/99 and 1999/00

Utilization Summary	1998/99	1999/00	Percent Change 1999/00
Services Rendered	791	812	2.7
Amount Paid	136,074	141,101	3.7
Persons Receiving Insured Services (Beneficiaries)	770	780	1.3
Paid Per Service	172.03	173.77	1.0
Services Per Beneficiary	1.0	1.0	1.3
Paid Per Beneficiary	176.72	180.90	2.4

¹ Data provided are 'date of service'.

Prosthetic Programs - Limb Prostheses Utilization Summary Fiscal Years 1998/99 and 1999/00

Utilization Summary	1998/99	1999/00	Percent Change 1999/00
Services Rendered	1,144	979	(14.4)
Amount Paid	821,498	689,208	(16.1)
Persons Receiving Insured Services (Beneficiaries)	446	370	(17.0)
Paid Per Service	718.09	703.99	(2.0)
Services Per Beneficiary	2.6	2.6	3.2
Paid Per Beneficiary	1,841.92	1,862.72	1.1

¹ Data provided are 'date of service'.

Prosthetic Programs - Ocular Prostheses Utilization Summary Fiscal Years 1998/99 and 1999/00

Utilization Summary	1998/99	1999/00	Percent Change 1999/00
Services Rendered	428	344	(19.6)
Amount Paid	63,394	54,704	(13.7)
Persons Receiving Insured Services (Beneficiaries)	224	191	(14.7)
Paid Per Service	148.12	159.02	7.4
Services Per Beneficiary	1.9	1.8	(5.7)
Paid Per Beneficiary	283.01	286.41	1.2

¹ Data provided are 'date of service'.



Insured Programs Branch

Section Eight

Pharmacare Programs

Seniors' Pharmacare¹ Payment and Utilization Summary Fiscal Years 1997/98, 1998/99, 1999/00

Program Expenditure	1997/98	1998/99	1999/00²	Percent 1998/99	Change 1999/00
Seniors' Pharmacare	88,047,809	98,567,497	102,918,112	11.9	4.4
Chedabucto	791,081	920,144	1,013,038	16.3	10.1
Total Program Expenditure ²	88,838,890	99,487,640	103,931,150	12.0	4.5
Utilization Summary					
No. of Seniors ³	122,100	123,300	123,800	1.0	0.4
Insured Population⁴	107,700	108,200	103,743	0.5	(4.1)
Beneficiaries⁵	101,331	102,006	101,827	0.7	(0.2)
Percent of Insured Population	94.1	94.3	98.2	0.2	4.1
Prescriptions Dispensed	2,686,122	2,728,400	2,747,955	1.6	0.7
Prescriptions Per Insured	24.9	25.2	26.5	1.1	5.0
Expenditure Per Insured	824.87	919.48	1,001.81	11.5	9.0
Prescriptions Per Beneficiary	26.5	26.7	27.0	0.9	0.9
Expenditure Per Beneficiary	876.72	975.31	1,020.66	11.2	4.7

¹ Data provided are 'date of service'.

Includes Total Professional Fee Paid, Total Drug Cost Paid, Total Upcharge Paid, Chedabucto, and Manual Nursing Home payments. Financial adjustments for the Audited statement are not reflected in the statistical system. Audited expenditure for 97/98 - \$88,903,002; 98/99 - \$99,303,733; 99/00 - \$100,863,047.

³ New estimate of number of Seniors (65 years & older), from Statistics Canada as of July 1st each year.

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

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

Female Drug Utilization¹ by Age 1999/00

		Number of		Pharmacists'	Total Drug	Rx Per	Cost Per
Age Group	Beneficiaries	Prescriptions	Drug Cost	Fees ²	Costs	Beneficiary	Beneficiary
65 - 69	14,081	306,323	9,255,603	2,600,866	11,856,469	22	842.02
70 - 74	14,720	386,634	11,633,350	3,353,478	14,986,829	26	1,018.13
75 - 79	13,844	399,576	11,199,727	3,478,948	14,678,675	29	1,060.29
80 - 84	11,024	352,556	8,965,578	3,067,579	12,033,157	32	1,091.54
85 - 89	7,062	247,927	5,409,136	2,149,111	7,558,247	35	1,070.27
90 - 94	2,999	108,705	2,034,936	945,301	2,980,237	36	993.74
95 - 99	912	32,500	553,892	286,775	840,666	36	921.78
100+	201	5,674	80,297	50,002	130,299	28	648.25
Total	64,843	1,839,895	49,132,519	15,932,060	65,064,579	28	1,003.42

Data provided are 'date of service'.
 Includes Professional Fee and Upcharge.

Male Drug Utilization¹ by Age 1999/00

		Number of		Pharmacists'	Total Drug	Rx Per	Cost Per
Age Group	Beneficiaries	Prescriptions	Drug Cost	Fees ²	Costs	Beneficiary	Beneficiary
65 - 69	11,117	219,659	8,033,550	1,890,317	9,923,867	20	892.67
70 - 74	10,485	258,369	9,194,565	2,283,762	11,478,327	25	1,094.74
75 - 79	7,049	182,738	6,317,754	1,632,797	7,950,551	26	1,127.90
80 - 84	4,553	127,821	4,039,985	1,141,055	5,181,039	28	1,137.94
85 - 89	2,640	82,864	2,325,377	741,775	3,067,152	31	1,161.80
90 - 94	929	29,969	728,194	266,403	994,598	32	1,070.61
95 - 99	191	5,929	125,016	51,394	176,410	31	923.61
100+	20	711	10,990	6,527	17,517	36	875.87
Total	36,984	908,060	30,775,432	8,014,029	38,789,461	25	1,048.82

Data provided are 'date of service'.
 Includes Professional Fee and Upcharge.

Total Drug Utilization¹ by Age 1999/00

		Number of		Pharmacists'	Total Drug	Rx Per	Cost Per
Age Group	Beneficiaries	Prescriptions	Drug Cost	Fees ²	Costs	Beneficiary	Beneficiary
65 - 69	25,198	525,982	17,289,154	4,491,182	21,780,336	21	864.37
70 - 74	25,205	645,003	20,827,916	5,637,240	26,465,156	26	1,050.00
75 - 79	20,893	582,314	17,517,481	5,111,745	22,629,226	28	1,083.10
80 - 84	15,577	480,377	13,005,562	4,208,934	17,214,496	31	1,105.12
85 - 89	9,702	330,791	7,734,512	2,890,886	10,625,399	34	1,095.18
90 - 94	3,928	138,674	2,763,130	1,211,704	3,974,834	35	1,011.92
95 - 99	1,103	38,429	678,907	338,168	1,017,076	35	922.10
100+	221	6,385	91,288	56,529	147,816	29	668.85
Manual					76,811		
Total	101,827	2,747,955	79,907,950	23,946,389	103,931,150 ³	27	1,020.66

Data provided are 'date of service'.
 Includes Professional Fee and Upcharge.
 Total will not agree with Table 8.5, age distribution of residents in Homes submitting manual data is not known.

Pharmacare Utilization¹ by District Health Authority Fiscal years 1998/99 and 1999/00

DHA	Benef	iciaries	Percent	Rx C	ount	Percent	Rx/Ben	eficiary	Total E	xpenditure	Percent	Cost/Be	neficiary
	1998/99	1999/00	Change	1998/99	1999/00	Change	98/99	99/00	1998/99	1999/00	Change	1998/99	1999/00
1- South Shore	8,334	8,403	8.0	211,390	224,428	6.2	25.4	26.7	7,749,850	8,508,511	9.8	929.91	1,012.56
2 - South West Nova	8,750	8,830	0.9	255,470	275,046	7.7	29.2	31.1	8,476,888	9,459,516	11.6	968.79	1,071.29
3 - Annapolis Valley	9,461	9,501	0.4	242,140	245,410	1.4	25.6	25.8	8,690,828	9,054,806	4.2	918.60	953.04
4 - Colchester East Hants	7,331	7,482	2.1	171,400	183,303	6.9	23.4	24.5	6,480,799	7,344,381	13.3	884.03	981.61
5 - Cumberland	4,955	4,957	0.0	146,701	157,032	7.0	29.6	31.7	5,026,992	5,466,414	8.7	1,014.53	1,102.77
6 - Pictou County	6,292	6,163	(2.1)	184,246	191,199	3.8	29.3	31.0	6,578,511	7,017,338	6.7	1,045.54	1,138.62
7 - Guysborough Antigonish Strait	5,761	5,818	1.0	163,281	174,954	7.1	28.3	30.1	5,666,715	6,305,544	11.3	983.63	1,083.80
8 - Cape Breton	17,027	17,235	1.2	441,585	468,341	6.1	25.9	27.2	16,037,347	17,886,003	11.5	941.88	1,037.77
9 - Capital	33,555	33,702	0.4	827,503	820,468	(0.9)	24.7	24.3	31,702,093	32,531,133	2.6	944.78	965.26
Unknown ²	540	69	(87.2)	84,684	7,774	(90.8)	156.8	112.7	3,027,087	280,695	(90.7)	5,605.72	4,068.04
Total	102,006	101,827	(0.2)	2,728,400	2,747,955	0.7	26.7	27.0	99,437,110	103,854,339	4 4.4	974.82	1,019.91

¹ Data provided are 'date of service'.

Unknowns due to gaz key missing in data at time of service.
 Beneficiaries columns may not add to totals as residents may be counted in more than one District Health Authority.

⁴ Total will not agree with Table 8.4, individual data are not available for manually submitted data.

Special Funding Assistance Programs¹ for Residents Payment Summary Fiscal Years 1997/98, 1998/99, 1999/00

				Percent Change		
Payment Summary	1997/98	1998/99	1999/00	1998/99	1999/00	
Cystic Fibrosis						
- drugs	967,086	748,932	841,515	(22.6)	12.4	
 equipment & emergency 	19,432	30,770	33,699	58.3	9.5	
Subtotal Cystic Fibrosis	986,518	779,702	875,214	(21.0)	12.2	
Diabetes Insipidus	109,083	108,631	114,210	(0.4)	5.1	
Cancer	296,988	268,056	305,066	(9.7)	13.8	
Growth Hormone Deficiency	341,982	305,805	375,576	(10.6)	22.8	
Hemophiliac Assistance Program	27,974	21,542	17,639	(23.0)	(18.1)	
Other	n/a	68,482	171,999	n/a	151.2	
Total Special Assistance Programs	1,762,545	1,552,218	1,859,704	(11.9)	19.8	

¹ Data provided are 'date of service'.

Special Funding Assistance for Residents with Cystic Fibrosis Utilization Summary Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
Program Expenditure ¹	1997/98	1998/99	1999/00	1998/99	1999/00
Drugs	967,086	748,932	841,515	(22.6)	12.4
Equipment	19,432	30,770	33,699	58.3	9.5
Total Program Expenditure	986,518	779,702	875,214	(21.0)	12.2
Utilization Summary					
Beneficiaries	157	159	154	1.3	(3.1)
Expenditure Per Beneficiary ²	6,159.78	4,710.26	5,464.38	(23.5)	16.0

¹ Data provided are 'date of service'.

² Per Beneficiary expenditure excludes dollar value for equipment.

Special Funding Assistance for Residents with Diabetes Insipidus Utilization Summary Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Percent Change		
	1997/98	1998/99	1999/00	1998/99	1999/00		
Program Expenditure ¹	109,083	108,631	114,210	(0.4)	5.1		
Utilization Summary							
Beneficiaries	63	64	69	1.6	7.8		
Expenditure Per Beneficiary	1,731.48	1,697.36	1,655.22	(2.0)	(2.5)		

¹ Data provided are 'date of service'.

Special Funding Assistance for Residents with Cancer Utilization Summary Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Change
	1997/98	1998/99	1999/00	1998/99	1999/00
Program Expenditure ¹	296,988	268,056	305,066	(9.7)	13.8
Utilization Summary					
Beneficiaries	279	348	366	24.7	5.2
Expenditure Per Beneficiary	1,064.47	770.28	833.51	(27.6)	8.2

¹ Data provided are 'date of service' .

Special Funding Assistance for Residents With Growth Hormone Deficiency Utilization Summary Fiscal Years 1997/98, 1998/99, 1999/00

				Percent	Percent Change		
	1997/98	1998/99	1999/00	1998/99	1999/00		
Program Expenditure ¹	341,982	305,805	375,576	(10.6)	22.8		
Utilization Summary							
Beneficiaries	33	33	35	0.0	6.1		
Expenditure Per Beneficiary	10,363.09	9,266.82	10,730.74	(10.6)	15.8		

¹ Data provided are 'date of service'.