



MEDICAL SERVICES INSURANCE
HI10 ANNUAL STATISTICAL TABLES

12 MONTHS ENDING MARCH 31, 2026

(with comparative statistics for previous years)

PREPARED BY
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MEDAVIE BLUECROSS FOR
Nova Scotia Department of Health and Wellness

available at <http://novascotia.ca/DHW>

(August 2026)

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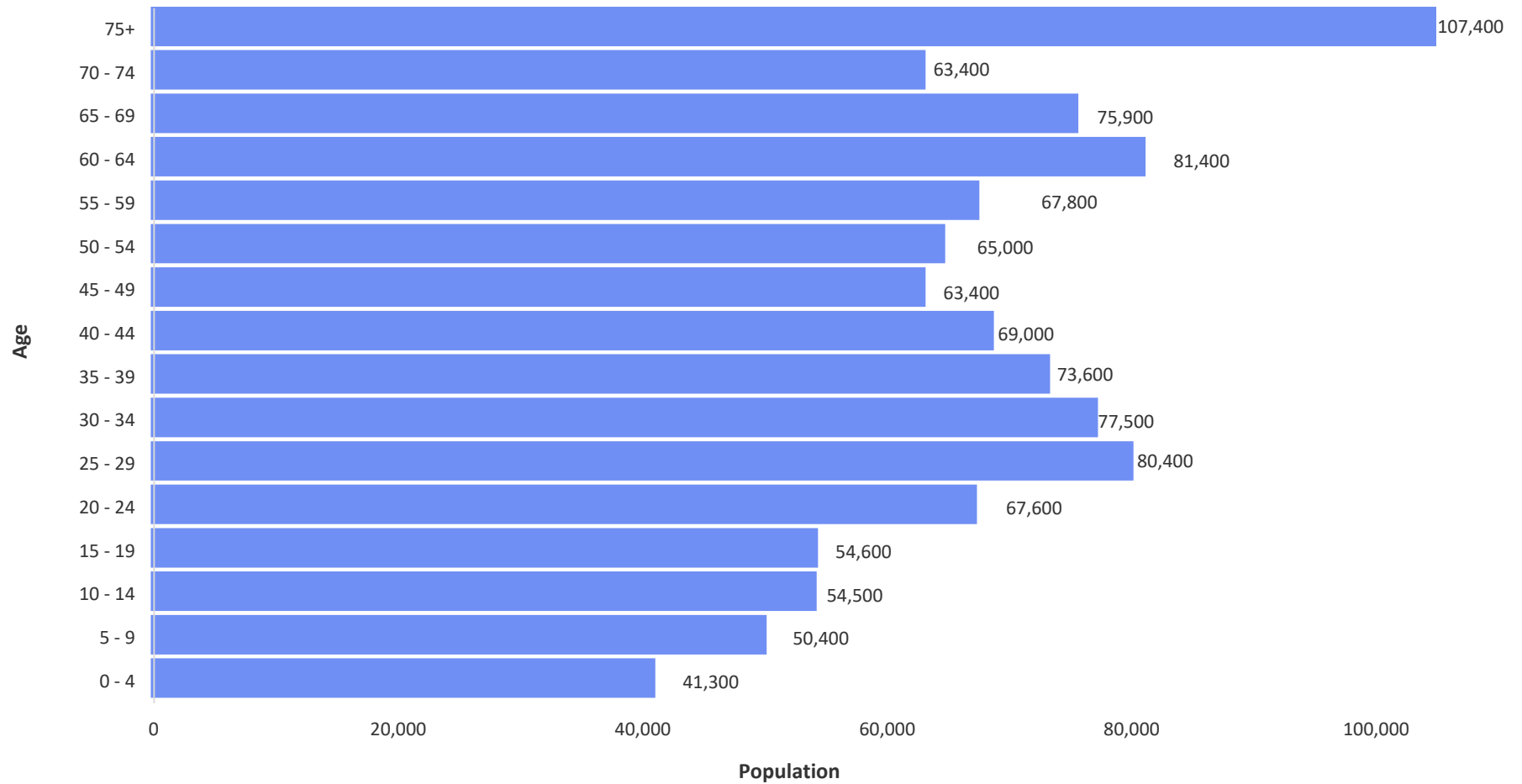
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Section One

Population Data

Nova Scotia Department of Health - Figure 1
Population by 5 Year Age Group as of July 1, 2026



Source: Statistics Canada

Nova Scotia Department of Health - Table 1.1
Distribution of Population¹ by Age Group
As of July 1st of each year

Age Group							Percent Change					
	2020/21 ²	2021/22 ²	2022/23 ²	2023/24 ²	2024/25 ²	2025/26 ²	20/21	21/22	22/23	23/24	24/25	25/26
Total	979,300	992,200	1,019,700	1,058,700	1,076,400	1,093,200	0.8%	1.3%	2.8%	3.8%	1.7%	1.6%
0 - 4	42,400	41,500	41,600	42,300	40,600	41,300	(1.9%)	(2.1%)	0.2%	1.7%	(4.0%)	1.7%
5 - 9	46,200	46,600	47,500	50,300	51,300	50,400	(0.2%)	0.9%	1.9%	5.9%	2.0%	(1.8%)
10 - 14	48,200	48,900	50,200	52,300	54,000	54,500	2.1%	1.5%	2.7%	4.2%	3.3%	0.9%
15 - 19	50,800	49,300	50,500	52,500	53,600	54,600	(1.4%)	(3.0%)	2.4%	4.0%	2.1%	1.9%
20 - 24	61,600	62,700	67,800	67,500	66,000	67,600	(0.5%)	1.8%	8.1%	(0.4%)	(2.2%)	2.4%
25 - 29	63,400	65,400	70,600	75,000	77,900	80,400	0.8%	3.2%	8.0%	6.2%	3.9%	3.2%
30 - 34	61,300	63,700	67,400	72,700	76,300	77,500	3.4%	3.9%	5.8%	7.9%	5.0%	1.6%
35 - 39	58,700	60,700	63,700	67,400	71,100	73,600	1.9%	3.4%	4.9%	5.8%	5.5%	3.5%
40 - 44	56,900	57,800	60,000	64,600	67,500	69,000	0.7%	1.6%	3.8%	7.7%	4.5%	2.2%
45 - 49	61,200	60,600	60,100	61,300	62,400	63,400	(0.8%)	(1.0%)	(0.8%)	2.0%	1.8%	1.6%
50 - 54	65,300	64,600	64,500	65,300	65,300	65,000	(3.3%)	(1.1%)	(0.2%)	1.2%	0.0%	(0.5%)
55 - 59	78,800	77,300	74,800	73,100	70,200	67,800	(0.5%)	(1.9%)	3.2%	(2.3%)	(4.0%)	(3.4%)
60 - 64	75,900	77,200	78,200	80,900	81,600	81,400	1.3%	1.7%	1.3%	3.5%	0.9%	(0.2%)
65 - 69	66,700	68,400	70,300	73,700	74,600	75,900	2.8%	2.5%	2.8%	4.8%	1.2%	1.7%
70 - 74	57,400	59,300	59,100	60,200	61,400	63,400	4.7%	3.3%	(0.3%)	1.9%	2.0%	3.3%
75+	84,800	88,200	93,300	99,600	102,700	107,400	3.4%	4.0%	5.8%	6.8%	3.1%	4.6%

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

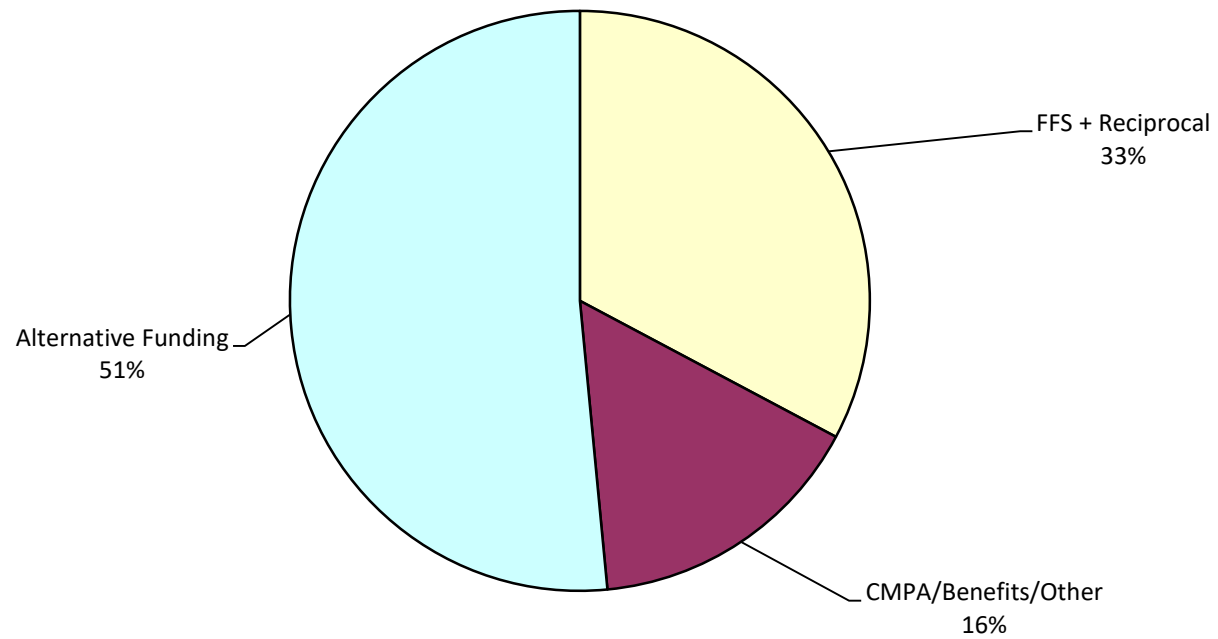
² Column may not add to total due to rounding.



Section Two

Actual Financial Payments to Physicians

**Actual Financial Payments to Physicians by Use of Funds
Nova Scotia 2025-2026 (Current Dollars)**



Medical Payments

Financial Report¹

Payment Type	Actuals	Actuals	Actuals	Actuals	Actuals	Percent Change				
	21/22	22/23	23/24	24/25	25/26	21/22	22/23	23/24	24/25	25/26
Fee for Service and Reciprocal										
Fee for Service	\$296,818,556	\$306,059,930	\$381,152,219	\$380,409,599	\$446,893,273	3.2%	3.2%	24.5%	(0.2%)	17.5%
Reciprocal Billing	\$6,540,334	\$9,253,607	\$8,945,729	\$8,900,193	\$9,522,181	(4.7%)	41.5%	(3.3%)	(0.5%)	7.0%
Diag Image/Path Rad/Int Med⁴	\$76,237,970	\$78,867,965	\$0	\$0	\$0	39.8%	3.4%	0.0%	-	-
Subtotal	\$379,596,860	\$394,181,502	\$390,097,948	\$389,309,792	\$456,415,454	8.6	3.8	(0.0)	(0.0)	0.2
Alternative Funding										
Alternative Funding	\$389,781,394	\$415,325,822	\$411,310,028	\$423,130,023	\$462,498,350	6.2%	6.6%	(1.0%)	2.9%	9.3%
Emergency Departments	\$71,117,316	\$72,733,888	\$79,087,388	\$87,111,730	\$92,172,138	2.1%	2.3%	8.7%	10.1%	5.8%
Longitudinal Family Medicine	-	-	\$79,560,434	\$186,076,144	\$162,934,475	-	-	0.0%	133.9%	(12.4%)
Subtotal	\$460,898,710	\$488,059,709	\$569,957,850	\$696,317,897	\$717,604,963	550.5%	589.3%	16.8%	22.2%	3.1%
CMPA, Benefits, HST and Other										
Retention and Recruitment (Benefit) Fund	\$6,943,325	\$7,394,207	\$8,704,237	\$10,861,238	\$11,161,267	14.4%	6.5%	17.7%	24.8%	2.8%
CMPA Rebate	\$4,994,558	\$4,346,079	-\$936,942	\$480,624	\$1,109,727	(23.8%)	(13.0%)	(121.6%)	151.3%	130.9%
Family Med Residency Expansion	\$1,676,405	\$2,542,670	\$3,535,105	\$9,999,678	\$10,038,397	11.7%	51.7%	39.0%	182.9%	0.4%
Debt Assistance and Other Initiatives	\$227,115	\$106,200	\$75,600	\$41,250	\$198,861	(4.7%)	(53.2%)	(28.8%)	(45.4%)	382.1%
Resident Salaries and Training	\$37,600,921	\$37,961,410	\$41,900,923	\$45,135,245	\$47,025,841	0.9%	1.0%	10.4%	7.7%	4.2%
Electronic Medical Record	\$7,439,968	\$7,501,033	\$1,700,000	\$8,793,565	\$5,337,281	(3.6%)	0.8%	(77.3%)	417.3%	(39.3%)
Facility On-Call	\$11,969,059	\$12,215,810	\$15,396,820	\$16,403,357	\$15,653,160	(2.3%)	2.1%	26.0%	6.5%	(4.6%)
Resident Tuition	\$1,148,706	\$1,198,736	\$1,299,233	\$1,405,292	\$1,467,659	4.2%	4.4%	8.4%	8.2%	4.4%
Physician Training Seats	\$70,665	\$4,912	\$103,061	\$116,201	\$107,134	(25.0%)	(96.0%)	1998.0%	12.7%	(7.8%)
Continuing Medical Education	\$3,143,000	\$4,042,753	\$4,331,556	\$4,510,048	\$4,848,616	(29.2%)	28.6%	7.1%	4.1%	7.5%
Rural Specialist Incentive Program	\$5,137,166	\$5,577,333	\$5,772,000	\$10,300,667	\$12,338,667	47.9%	8.6%	3.5%	78.5%	19.8%
Comprehensive Care Incentive Program	\$0	\$0	\$0	\$0	\$0	0.0%	-	-	-	-
Collaborative Practice Incentive Program	\$1,515,000	\$2,020,000	\$735,000	\$3,722,609	\$2,100,000	(3.5%)	33.3%	(63.6%)	406.5%	(43.6%)
Collaborative Emergency Centres	\$9,058,479	\$8,017,575	\$3,334,378	\$0	\$0	60.0%	(11.5%)	(58.4%)	(100.0%)	-
Family Medicine Bursary	\$130,000	\$196,000	\$50,000	\$0	\$0	(51.9%)	50.8%	(74.5%)	(100.0%)	-
Tuition Relief	\$2,103,810	\$1,227,970	\$1,000,082	\$316,274	\$226,618	(3.0%)	(41.6%)	(18.6%)	(68.4%)	(28.3%)
Targeted Project Funding	\$1,457,111	\$1,178,456	\$1,195,527	\$2,033,594	\$645,517	24.9%	14.7%	1.4%	70.1%	(68.3%)
Physician Hospitalists	\$23,937,254	\$27,445,651	\$34,674,733	\$48,775,975	\$61,434,668	24.9%	14.7%	26.3%	40.7%	26.0%
Appeals Costs	\$23,842	\$14,599	\$0	\$1,082	\$2,282	(75.5%)	(38.8%)	0.0%	0.0%	110.9%
Practice Ready Assessment	\$971,884	\$1,387,107	\$1,271,441	\$1,353,459	\$828,059	46.4%	42.7%	(8.3%)	6.5%	(38.8%)
New Family Medicine Residency Spaces (Seats)	\$864,756	\$0	\$0	\$0	\$0	22.0%	0.0%	-	-	-
New Specialty Residency Spaces (Seats)	\$97,266	\$99,030	\$122,368	\$148,488	\$180,128	10.8%	1.8%	23.6%	21.3%	21.3%
Technology Incentive	\$0	\$0	\$0	\$0	\$0	0.0%	-	-	-	-
Longitudinal Integrated Clerkship	\$125,073	\$151,543	\$124,340	\$168,366	\$169,332	12.5%	21.2%	(18.0%)	35.4%	0.6%
Community Hospital Inpatient Program	\$3,460,270	\$3,300,264	\$4,050,225	\$4,075,943	\$5,455,648	(17.3%)	(4.6%)	22.7%	0.6%	33.8%
Primary Maternity Care	\$4,158,556	\$3,898,098	\$4,309,162	\$4,515,873	\$4,608,231	(5.5%)	(6.3%)	10.5%	4.8%	2.0%
Primary Care Provider Incentive	-	\$507,500	\$2,185,300	\$1,282,750	\$1,543,625	-	0.0%	330.6%	(41.3%)	20.3%
Specialist Incentive	-	\$453,750	\$80,000	\$1,245,500	\$1,473,750	-	0.0%	(82.4%)	1456.9%	18.3%
UpToDate	-	-	\$1,993,529	\$1,801,969	\$1,836,295	-	-	0.0%	(9.6%)	1.9%
Rostering Grant	-	-	\$8,609,698	\$4,503,720	\$5,274,377	-	-	0.0%	(47.7%)	17.1%
Redeployment	-	-	\$287,610	\$570,722	\$1,063,234	-	-	0.0%	98.4%	86.3%
Allied Health Care Professionals	-	-	-	\$159,322	\$0	-	-	-	-	-
Central Zone Physician Incentive	-	-	-	\$638,000	\$1,164,950	-	-	-	-	82.6%
Physician Retirement Fund	-	-	-	\$22,072,692	\$23,038,974	-	-	-	-	4.4%
Subtotal	\$128,254,188	\$132,788,687	\$145,904,984	\$205,433,502	\$220,332,297	4.9%	3.5%	9.9%	40.8%	7.3%
Grand Total	\$968,749,759	\$1,015,029,898	\$1,105,960,783	\$1,291,061,191	\$1,394,352,714	6.6%	4.8%	9.0%	16.7%	8.0%

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.

⁴ In previous reports, Diagnostic Imaging, Pathology, Radiation Oncology and Internal Medicine services were reported separately based on historical bulk billing. Since these services are now claimed via Fee for Service or Alternative Funding, the payments are included in the appropriate categories for 2023-2024.



Section Three

Statistical Data

Summary of Payments^{1,2}

	Payment Summary					Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Total	\$1,217,435,649	\$1,293,047,509	\$1,430,499,338	\$1,620,203,808	\$1,787,166,606	5.7%	6.2%	10.6%	13.3%	10.3%
Physicians' Services ³	\$923,670,325	\$968,981,019	\$1,068,606,104	\$1,202,076,698	\$1,322,662,682	4.6%	4.9%	10.3%	12.5%	10.0%
Dental Services	\$9,710,221	\$10,002,768	\$13,953,282	\$15,104,564	\$14,170,699	9.8%	3.0%	39.5%	8.3%	(6.2%)
Optometric Services	\$9,918,602	\$10,036,055	\$10,633,749	\$15,044,970	\$15,729,045	36.9%	1.2%	6.0%	41.5%	4.5%
Prescription Drugs ⁴	\$272,879,062	\$302,577,646	\$335,491,280	\$385,710,278	\$432,356,512	8.7%	10.9%	10.9%	15.0%	12.1%
Prosthetic Services	\$1,257,439	\$1,450,021	\$1,814,923	\$2,267,298	\$2,247,669	0.8%	15.3%	25.2%	24.9%	(0.9%)

¹ Data is based on date of service, with the exception of limb prostheses under Prosthetic Services, which is based on date of invoice.

² Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Optometric Programs was updated in the 2022-2023 report and reflected in previously reported years 2018-2019, 2019-2020, 2020-2021 and 2021-2022.

³ Includes CMPA, Benefit Fund, Emergency.

⁴ MSI Pharmacare includes Professional Fee, Drug Cost, Upcharge, and Special Funding Assistance Programs. This represents the government paid portion of expenditure only for the Seniors and Family pharmacare programs.



Section Four

Physicians' Services

Nova Scotia Department of Health - Table 4.1

Physicians' Services¹
Payment Summary by Date of Service

Payment Summary	Payments					Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Fee-for-Service										
NS Resident, NS Physician	\$376,406,902	\$391,076,855	\$398,005,321	\$392,061,893	\$403,782,434	23.6%	3.9%	1.8%	(1.5%)	3.0%
NS Resident, Non NS Physician	\$7,760,309	\$10,199,636	\$10,244,443	\$10,770,008	\$10,737,213	9.9%	31.4%	0.4%	5.1%	(0.3%)
Total Fee-for-Service	\$384,167,212	\$401,276,491	\$408,249,764	\$402,831,901	\$414,519,647	23.3%	4.5%	1.7%	(1.3%)	2.9%
Alternative Funding										
Fixed Periodic Payment - Individual	\$85,535,943	\$99,980,048	\$81,836,796	\$64,095,226	\$73,862,253	(28.3%)	16.9%	(18.1%)	(21.7%)	15.2%
Fixed Periodic Payment - Group	\$328,464,863	\$343,223,415	\$369,661,450	\$402,707,712	\$413,815,284	5.6%	4.5%	7.7%	8.9%	2.8%
Sessional	\$20,468,860	\$17,774,422	\$24,933,408	\$37,518,877	\$43,535,335	22.2%	(13.2%)	40.3%	50.5%	16.0%
Psychiatry ²	\$16,101,941	\$17,088,488	\$19,017,709	\$21,576,193	\$24,261,917	4.9%	6.1%	11.3%	13.5%	12.4%
Emergency Room Levels 1 & 2	\$31,951,875	\$33,706,802	\$38,100,567	\$43,859,013	\$47,661,058	3.1%	5.5%	13.0%	15.1%	8.7%
Emergency Room Levels 3 & 4	\$17,457,636	\$15,821,696	\$16,067,801	\$16,930,621	\$18,864,256	(2.7%)	(9.4%)	1.6%	5.4%	11.4%
Facility On Call ³	\$3,227,040	\$0	\$0	\$0	\$0	(73.7%)	0.0%	0.0%	0.0%	0.0%
Longitudinal Family Medicine (LFM)	-	-	\$64,469,224	\$168,299,056	\$209,292,177	-	-	0.0%	161.1%	24.4%
First Nations Funding (FNFM)					\$919,173					0.0%
Retro Payments ⁴	-	-	\$9,742,140	\$3,478,836	\$862,336	-	-	0.0%	(64.3%)	(75.2%)
Total Alternative Funding	\$503,208,158	\$527,594,870	\$623,829,093	\$758,465,534	\$833,073,789	(3.9%)	4.8%	18.2%	21.6%	9.8%
Other Payments										
Retro Payments ⁵	\$3,889,000	\$4,888,078	\$0	\$0	\$0	(72.2%)	25.7%	0.0%	0.0%	0.0%
Benefit Fund	\$6,943,325	\$7,394,207	\$8,704,237	\$10,861,238	\$11,161,267	14.4%	6.5%	17.7%	24.8%	2.8%
CMPA	\$5,350,859	\$4,821,685	\$171,170	\$413,006	\$1,081,343	(23.1%)	(9.9%)	(96.4%)	141.3%	161.8%
Incentive Payments	\$20,360,288	\$23,492,974	\$29,314,238	\$27,312,418	\$62,817,731	(4.1%)	15.4%	24.8%	(6.8%)	130.0%
Miscellaneous Adjustments ⁶	-\$248,516	-\$487,285	-\$1,662,398	\$2,192,601	\$8,905	24.9%	(96.1%)	(241.2%)	231.9%	(99.6%)
Total Other Payments	\$36,294,955	\$40,109,659	\$36,527,247	\$40,779,263	\$75,069,246	(24.2%)	10.5%	(8.9%)	11.6%	84.1%
Total Physician Payments	\$923,670,325	\$968,981,019	\$1,068,606,104	\$1,202,076,698	\$1,322,662,682	4.6%	4.9%	10.3%	12.5%	10.0%

¹Data is based on date of service.²Includes Hourly Paid, Institutional Psychiatry and Psychiatry Stabilization Funding.³Facility On Call moved to Fee for Service as of July 1, 2021.⁴Includes all retroactive payments for adjustments made to fixed period payments, sessional and psychiatry payment models.⁵Starting in 2023-2024, retroactive payments are included in the appropriate categories (ie. Fee-for-service, Alternative Funding).⁶Miscellaneous adjustments include audit recoveries, recovery of overpayments of Alternative Funding programs etc.

Nova Scotia Department of Health - Table 4.2
Total Payments^{1,2} for Physicians Services and Expenditure Per Insured Person

Year	Total Paid	Expenditure per Insured Person ³	Percentage Change from Previous Year
2025/26	\$1,322,662,682	\$1,117.65	9.0%
2024/25	\$1,202,076,698	\$1,025.41	11.0%
2023/24	\$1,068,606,104	\$923.38	(2.8%)
2022/23	\$968,981,019	\$950.26	2.1%
2021/22	\$923,670,325	\$930.93	3.2%
2020/21	\$883,191,802	\$901.86	3.0%
2019/20	\$840,230,882	\$875.24	5.0%
2018/19	\$800,443,256	\$833.80	3.3%
2017/18	\$769,648,158	\$806.84	4.2%
2016/17	\$735,418,537	\$774.53	(1.4%)

¹Data is based on date of service.

²Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Medicare Programs was updated in the 2021-2022 report and reflected in previously reported years 2017-2018, 2018-2019, 2019-2020 and 2020-2021.

³Based on Medavie insured person data. Reporting prior to 2023-24 was based on Statistics Canada total population data.

Physicians' Services¹
Number of Physicians Paid²

Payment Category	Number of Physicians				Percent Change			
	22/23	23/24	24/25	25/26	22/23	23/24	24/25	25/26
Fee-for-Service payments only	600	673	630	616	8.5%	12.2%	(6.4%)	(2.2%)
Physicians receiving types of Alternative Funding ³	956	824	908	1046	14.5%	(13.8%)	10.2%	15.2%
Fee-for-Service with other combinations of payment types	1477	1525	1687	1807	(2.7%)	3.2%	10.6%	7.1%
Total Physicians receiving Payments	3,033	3,022	3,225	3,469	4.4%	(0.4%)	6.7%	7.6%

¹ Data is based on date of service.

² Includes physicians with a total payment => \$1.00 and physicians from Alternative Funded Groups.

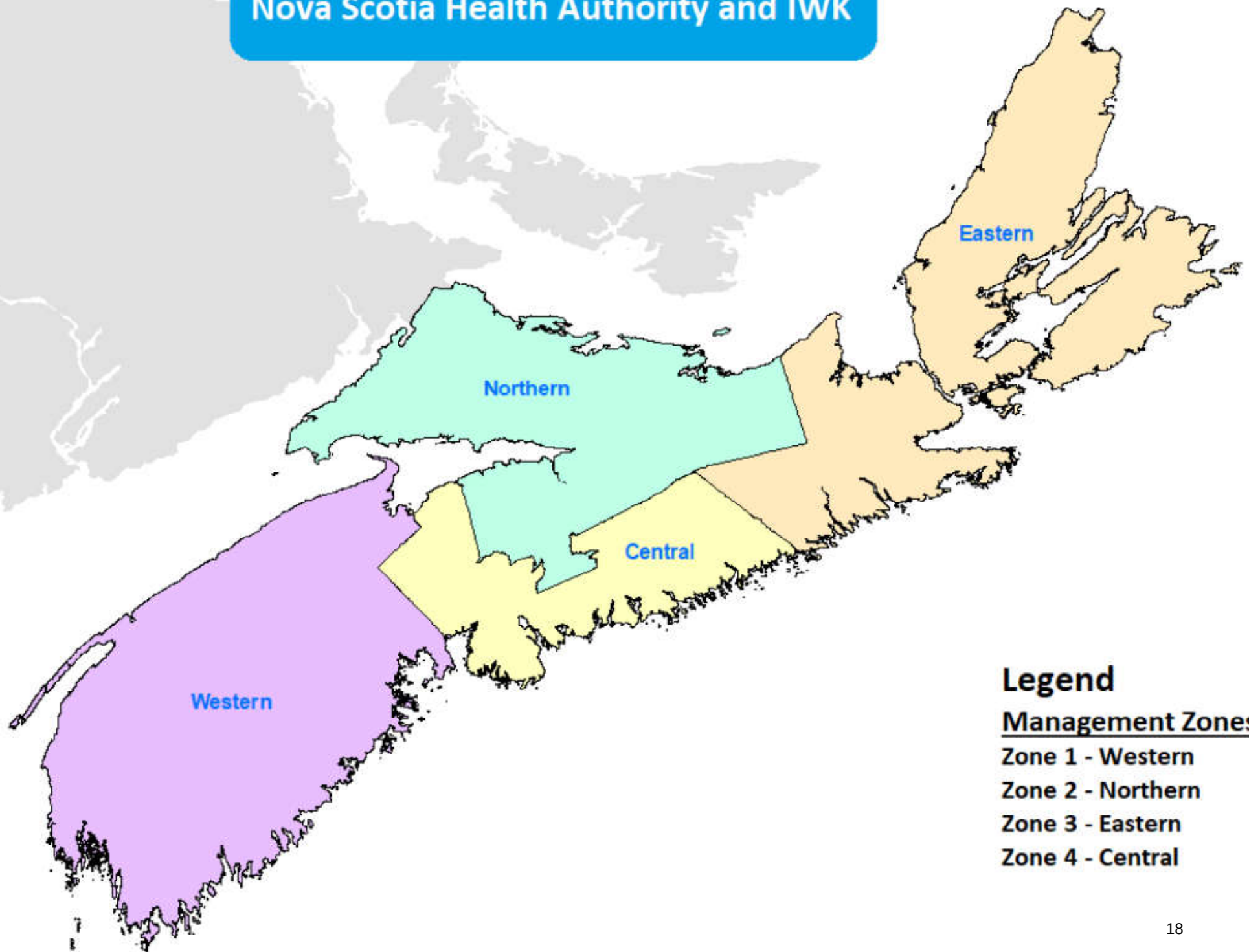
³ Alternative Funding includes LFM.

Utilization of Physicians' Services¹

Utilization Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Total Payments for Physicians' Services	\$923,670,325	\$968,981,019	\$1,068,606,104	\$1,202,076,698	\$1,322,662,682	4.6%	4.9%	10.3%	12.5%	10.0%
Total Services ²	8,792,136	8,905,621	9,064,814	9,511,281	9,766,478	9.0%	1.3%	1.8%	4.9%	2.7%
Insured Persons ³	992,200	1,019,700	1,157,279	1,172,289	1,183,427	1.3%	2.8%	13.5%	1.3%	1.0%
Services per Insured Person	8.0	7.9	7.8	8.1	8.3	1.8%	2.5%	(0.6%)	3.6%	1.7%
Expenditure per Insured Person	\$930.93	\$950.26	\$923.38	\$1,025.41	\$1,117.65	4.9%	(1.2%)	(2.8%)	11.0%	9.0%
Total Beneficiaries receiving Insured Services	793,097	813,386	819,763	846,245	859,891	3.4%	2.6%	0.8%	3.2%	1.6%
Percent of Beneficiaries to Insured Persons	79.9%	79.7%	70.8%	72.2%	72.7%	2.1%	(0.2%)	(11.1%)	1.9%	0.7%
Services per Beneficiary	11.1	10.9	11.1	11.2	11.4	5.4%	(1.2%)	1.0%	1.6%	1.1%
Expenditure per Beneficiary	\$1,164.64	\$1,191.29	\$1,303.55	\$1,420.48	\$1,538.17	1.1%	2.3%	9.4%	9.0%	8.3%

¹Data is based on date of service.²Includes Fee-for-Service, Shadow and Pay Patient Services.³Based on Medavie insured person data. Reporting prior to 2023-24 was based on Statistics Canada total population data.

Nova Scotia Health Authority and IWK



Legend

Management Zones

- Zone 1 - Western
- Zone 2 - Northern
- Zone 3 - Eastern
- Zone 4 - Central

Nova Scotia Department of Health - Table 4.5
Physicians' Gross Payments by Zone

Zone	2023/24			2024/25			2025/26		
	No. of Physicians ²	Amount Paid	Average Paid Per Physician	No. of Physicians ²	Amount Paid	Average Paid Per Physician	No. of Physicians ²	Amount Paid	Average Paid Per Physician
1 - Western	511	\$173,488,298	\$339,507	548	\$198,098,856	\$361,494	563	\$216,744,766	\$384,982
2 - Northern	311	\$115,907,180	\$372,692	347	\$134,264,931	\$386,931	368	\$145,759,543	\$396,086
3 - Eastern	430	\$167,339,724	\$389,162	477	\$185,119,483	\$388,091	522	\$201,847,389	\$386,681
4 - Central	1761	\$606,874,130	\$344,619	1817	\$667,977,413	\$367,627	1973	\$743,398,461	\$376,786
Other ³	9	\$419,551	\$46,617	36	\$8,731,169	\$242,532	43	\$9,612,530	\$223,547
Total	3,022	\$1,064,028,884	\$352,094	3,225	\$1,194,191,853	\$370,292	3,469	\$1,317,362,689	\$379,753

¹Includes Fee-for-Service, Fixed Periodic Payments/Sessional, Pathology/Radiology/Internal Medicine Contracts, Emergency Unit payments, and Alternative Funded groups.

²Physician count includes all physicians with a total payment => \$1.00 and physicians from Alternative Funded Groups.

³Other includes physicians with an unknown zone (ie. providing virtual care).

Nova Scotia Department of Health - Table 4.6
Distribution of Gross Payments¹ by Specialty and Zone

Zone	Family Practice ²			Specialists ^{2,3}			Total		
	No. of Physicians ⁴	Payments	Average Per Physician	No. of Physicians ⁴	Payments	Average Per Physician	No. of Physicians ⁴	Payments	Average Per Physician
1 - Western	296	\$102,277,305	\$345,531	267	\$114,467,461	\$428,717	563	\$216,744,766	\$384,982
2 - Northern	185	\$66,621,692	\$360,117	183	\$79,137,852	\$432,447	368	\$145,759,543	\$396,086
3 - Eastern	257	\$96,993,322	\$377,406	265	\$104,854,067	\$395,676	522	\$201,847,389	\$386,681
4 - Central	714	\$215,365,435	\$301,632	1259	\$528,033,025	\$419,407	1973	\$743,398,461	\$376,786
Other ⁵	30	\$1,695,483	\$56,516	13	\$7,917,047	\$609,004	43	\$9,612,530	\$223,547
Total	1482	\$482,953,238	\$325,879	1,987	\$834,409,451	\$419,934	3,469	\$1,317,362,689	\$379,753

¹Data is based on date of service.

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

³Includes Palliative Care.

⁴Physician count includes all physicians with total billed => \$1.00.

⁵Other includes physicians with an unknown zone (ie. providing virtual care).

Nova Scotia Department of Health - Table 4.7
Physicians' Services¹ Fee for Service and Shadow Services
Number of Services by Type of Service

	2022/23		2023/24		2024/25		2025/26		Percent Change			
	No. of Services	% of Total	No. of Services	% of Total	No. of Services	% of Total	No. of Services	% of Total	22/23	23/24	24/25	25/26
Consultations	424,547	4.8	448,698	5.0	470,953	5.0	493,542	5.1	1.7%	5.7%	5.0%	4.8%
Office Visits	3,399,138	38.2	3,330,280	36.8	3,457,067	36.4	3,544,093	36.4	0.3%	(2.0%)	3.8%	2.5%
Home Visits	23,828	0.3	22,243	0.2	19,917	0.2	20,751	0.2	(4.0%)	(6.7%)	(10.5%)	4.2%
Nursing Home Visits	117,417	1.3	114,066	1.3	118,259	1.2	125,853	1.3	4.4%	(2.9%)	3.7%	6.4%
Hospital Visits	500,169	5.6	508,951	5.6	513,501	5.4	521,066	5.3	(2.7%)	1.8%	0.9%	1.5%
Other Visits	497	0.0	436	0.0	146	0.0	111	0.0	31.8%	(12.3%)	(66.5%)	(24.0%)
Emergency & Out-Patient Dept. Visit	425,308	4.8	404,163	4.5	402,835	4.2	375,059	3.8	(0.4%)	(5.0%)	(0.3%)	(6.9%)
Critical Care	49,519	0.6	49,656	0.5	50,861	0.5	50,501	0.5	(0.6%)	0.3%	2.4%	(0.7%)
Psychiatric Services	55,904	0.6	46,940	0.5	38,170	0.4	37,350	0.4	(9.0%)	(16.0%)	(18.7%)	(2.1%)
Subtotal	4,996,327	56.2	4,925,433	54.5	5,071,709	53.4	5,168,326	53.0	0.0%	(1.4%)	3.0%	1.9%
Eye Examinations	25,140	0.3	26,954	0.3	27,806	0.3	27,297	0.3	6.5%	7.2%	3.2%	(1.8%)
Other Diagnostic & Therapeutic	1,018,469	11.5	1,014,927	11.2	1,043,279	11.0	1,057,978	10.9	2.9%	(0.3%)	2.8%	1.4%
Subtotal	1,043,609	11.7	1,041,881	11.5	1,071,085	11.3	1,085,275	11.1	3.0%	(0.2%)	2.8%	1.3%
Obstetrical Care	72,109	0.8	73,844	0.8	75,259	0.8	78,622	0.8	(2.6%)	2.4%	1.9%	4.5%
Major Surgery	112,577	1.3	118,838	1.3	125,940	1.3	132,798	1.4	9.7%	5.6%	6.0%	5.4%
Minor Surgery	98,982	1.1	104,738	1.2	106,342	1.1	114,031	1.2	9.6%	5.8%	1.5%	7.2%
Surgical Assist	32,090	0.4	33,344	0.4	37,043	0.4	40,887	0.4	13.3%	3.9%	11.1%	10.4%
Anaesthesia	64,261	0.7	65,846	0.7	69,802	0.7	71,308	0.7	6.6%	2.5%	6.0%	2.2%
Subtotal	380,019	4.3	396,610	4.4	414,386	4.4	437,646	4.5	6.9%	4.4%	4.5%	5.6%
All Other Services ²	2,470,651	27.8	2,681,564	29.6	2,935,664	30.9	3,058,100	31.4	2.2%	8.5%	9.5%	4.2%
Total Fee-for-Service	8,890,606	100.0	9,045,488	100.0	9,492,844	100.0	9,749,347	100.0	1.2%	1.7%	4.9%	2.7%
Pay Patient ³	15,015		19,326		18,437		17,131		78.2%	28.7%	(4.6%)	(7.1%)
Grand Total	8,905,621		9,064,814		9,511,281		9,766,478		1.3%	1.8%	4.9%	2.7%

¹Data is based on date of service and includes Shadow Services from Alternative Funded Programs.

²Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, non-obstetrical pain management and radiology/pathology/int medicine (starting in 15/16).

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

Nova Scotia Department of Health - Table 4.8
Physicians¹ Services Fee For Service and Shadow Services
Services Per 1,000 Insured Persons²

	Number of Services Per 1,000 Insured					Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Consultations	421	416	388	402	417	11.7%	(1.0%)	(6.9%)	3.6%	3.8%
Office Visits	3,416	3,333	2,878	2,949	2,995	3.0%	(2.4%)	(13.7%)	2.5%	1.6%
Home Visits	25	23	19	17	18	(11.3%)	(0.6%)	(17.7%)	(11.6%)	3.2%
Nursing Home Visits	113	115	99	101	106	4.3%	1.6%	(14.4%)	2.3%	5.4%
Hospital Visits	518	491	440	438	440	3.4%	(5.4%)	(10.3%)	(0.4%)	0.5%
Other Visits	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0.0%
Emergency & Out-Patient Dept. Visit	430	417	349	344	317	1.4%	(3.1%)	(16.3%)	(1.6%)	(7.8%)
Intensive/Critical Care	50	49	43	43	43	3.9%	(3.3%)	(11.6%)	1.1%	(1.6%)
Psychiatric Services	62	55	41	33	32	(4.7%)	(11.4%)	(26.0%)	(19.7%)	(3.1%)
Subtotal	5,036	4,900	4,256	4,326	4,367	3.5%	(2.7%)	(13.1%)	1.7%	0.9%
Eye Examinations	24	25	23	24	23	17.2%	3.6%	(5.5%)	1.8%	(2.8%)
Other Diagnostic & Therapeutic	997	999	877	890	894	26.7%	0.1%	(12.2%)	1.5%	0.5%
Subtotal	1,021	1,023	900	914	917	26.5%	0.2%	(12.0%)	1.5%	0.4%
Obstetrical Care	75	71	64	64	66	6.7%	(5.2%)	(9.8%)	0.6%	3.5%
Major Surgery	103	110	103	107	112	6.3%	6.7%	(7.0%)	4.6%	4.5%
Minor Surgery	91	97	91	91	96	17.7%	6.6%	(6.8%)	0.2%	6.2%
Surgical Assist	29	31	29	32	35	2.4%	10.2%	(8.4%)	9.7%	9.3%
Anaesthesia	61	63	57	60	60	1.1%	3.7%	(9.7%)	4.7%	1.2%
Subtotal	358	373	343	353	370	7.8%	4.0%	(8.0%)	3.1%	4.6%
All Other Services ³	2,446	2,438	2,334	2,520	2,599	9.8%	(0.3%)	(4.3%)	8.0%	3.1%
TOTAL⁴	8,861	8,734	7,833	8,113	8,253	7.6%	(1.4%)	(10.3%)	3.6%	1.7%

¹Data is based on date of service and includes shadow services from Alternative Funded Programs.

²Based on Medavie insured person data. Reporting prior to 2023-24 was based on Statistics Canada total population data.

³Includes services for add on, bone grafts, casts and splints, complete care, default, dislocations, manual assess, non-obstetrical pain management and radiology/pathology/int medicine (starting 15/16).

⁴Columns may not add to totals and subtotals due to rounding.



Section Five

Dental Programs

Nova Scotia Department of Health - Table 5.1

**Dental Programs
Payment Summary¹**

Payment Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Children's Oral Health Program	\$6,118,156	\$6,226,154	\$9,838,018	\$10,942,218	\$9,901,645	14.2%	1.8%	58.0%	11.2%	(9.5%)
Oral and Maxillofacial Surgery	\$1,208,786	\$1,477,749	\$1,472,102	\$1,450,462	\$1,617,237	(12.8%)	22.3%	(0.4%)	(1.5%)	11.5%
IWK Dental Academic Funding Plan ²	\$1,106,586	\$1,123,184	\$1,189,335	\$1,169,008	\$1,192,388	5.5%	1.5%	5.9%	(1.7%)	2.0%
Subtotal Dental Programs	\$8,433,528	\$8,827,088	\$12,499,455	\$13,561,687	\$12,711,269	8.2%	4.7%	41.6%	8.5%	(6.3%)
Special Dental Programs ³										
Maxillofacial Prosthodontics	\$469,960	\$533,511	\$627,988	\$676,890	\$567,179	4.8%	13.5%	17.7%	7.8%	(16.2%)
Cleft Palate	\$410,846	\$269,156	\$416,289	\$449,662	\$440,639	46.2%	(34.5%)	54.7%	8.0%	(2.0%)
Individuals with Special Needs	\$301,984	\$315,616	\$342,843	\$373,348	\$392,060	15.9%	4.5%	8.6%	8.9%	5.0%
Exceptional Circumstances	\$93,903	\$57,397	\$66,707	\$42,977	\$59,551	55.2%	(38.9%)	16.2%	(35.6%)	38.6%
Subtotal Special Dental Programs	\$1,276,694	\$1,175,681	\$1,453,827	\$1,542,877	\$1,459,429	21.6%	(7.6%)	23.7%	6.1%	(5.4%)
Total Dental Payments	\$9,710,221	\$10,002,768	\$13,953,282	\$15,104,564	\$14,170,699	9.8%	3.0%	39.5%	8.3%	(6.2%)

¹Data is based on date of service.

²Expenditures are based on bi-weekly payment cycles that occurred during the fiscal year and may differ slightly from the government's commitment defined in the IWK Dental Academic Funding Plan contract.

³Special Dental Programs procedures are also provided under the IWK Dental Academic Funding Plan. Amount paid excludes the IWK expenditure. This is included in the amount paid in Table 5.4.

Children's Oral Health Program**Utilization Summary^{1,2,3}**

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered ⁴	153,959	149,844	176,675	175,047	157,650	10.0%	(2.7%)	17.9%	(0.9%)	(9.9%)
Amount Paid	\$6,118,156	\$6,226,154	\$9,838,018	\$10,942,218	\$9,901,645	14.2%	1.8%	58.0%	11.2%	(9.5%)
Persons Insured ⁵	156,722	160,909	162,896	162,451	161,381	1.8%	2.7%	1.2%	(0.3%)	(0.7%)
Claimants ⁶	41,998	39,823	43,927	42,677	40,550	0.5%	(5.2%)	10.3%	(2.8%)	(5.0%)
Services per Claimant	3.7	3.8	4.0	4.1	3.9	9.5%	2.6%	6.9%	2.0%	(5.2%)
Paid per Claimant	\$145.68	\$156.35	\$223.96	\$256.40	\$244.18	13.6%	7.3%	43.2%	14.5%	(4.8%)

¹Data is based on date of service.

²Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Dental Programs was updated in the 2022-2023 report and reflected in previously reported years 2018-2019, 2019-2020, 2020-2021 and 2021-2022.

³Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.

⁴Services rendered includes laboratory services.

⁵A person who is eligible for children's dental services, provided by the province of Nova Scotia, at any point during fiscal year.

⁶Persons receiving insured services.

Oral and Maxillofacial Surgery**Utilization Summary^{1,2,3}**

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered ⁴	6,728	7,172	7,957	8,496	10,182	6.7%	6.6%	10.9%	6.8%	19.8%
Amount Paid	\$1,208,786	\$1,477,749	\$1,472,102	\$1,450,462	\$1,617,237	(12.8%)	22.3%	(0.4%)	(1.5%)	11.5%
Persons Insured ⁵	1,103,255	1,130,643	1,157,279	1,172,289	1,183,427	1.8%	2.5%	2.4%	1.3%	1.0%
Claimants ⁶	2,639	2,604	2,521	2,530	2,580	(1.3%)	(1.3%)	(3.2%)	0.4%	2.0%
Services per Claimant	2.5	2.8	3.2	3.4	3.9	8.1%	8.0%	14.6%	6.4%	17.5%
Paid per Claimant	\$458.05	\$567.49	\$583.94	\$573.31	\$626.84	(11.7%)	23.9%	2.9%	(1.8%)	9.3%

¹Data is based on date of service.²Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Dental Programs was updated in the 2022-2023 report and reflected in previously reported years 2018-2019, 2019-2020, 2020-2021 and 2021-2022.³Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.⁴Services rendered includes laboratory services.⁵A person who is eligible for public funded health services provided by the province of Nova Scotia at any point during fiscal year.⁶Persons receiving insured services.

IWK Dental Academic Funding Plan**Utilization Summary^{1,2}**

Utilization Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Services Rendered ³	9,991	9,247	9,989	13,078	13,043	17.4%	(7.4%)	8.0%	30.9%	(0.3%)
Amount Paid ⁴	\$1,106,586	\$1,123,184	\$1,189,335	\$1,169,008	\$1,192,388	5.5%	1.5%	5.9%	(1.7%)	2.0%
Claimants ⁵	1,795	1,716	1,674	2,357	2,170	26.2%	(4.4%)	(2.4%)	40.8%	(7.9%)
Services by Program										
Children's Oral Health	9,690	8,867	9,522	12,797	12,652	15.4%	(8.5%)	7.4%	34.4%	(1.1%)
Cleft Palate	1	5	7	13	0	0.0%	400.0%	40.0%	85.7%	0.0%
Individuals with Special Needs	300	375	460	268	391	165.5%	25.0%	22.7%	(41.7%)	45.9%
Oral and Maxillofacial Surgery	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0.0%
Exceptional Circumstances	0	0	0	0	0	0.0%	0.0%	0.0%	0.0%	0.0%

¹Data is date of service.²Includes services from providers funded by the IWK Dental Academic Funding Plan.³Services rendered includes laboratory services.⁴Expenditures are based on bi-weekly payment cycles that occurred during the fiscal year and may differ slightly from the government's commitment defined in the IWK Dental Academic Funding Plan contract.⁵Persons receiving insured services.

Nova Scotia Department of Health - Table 5.5
Special Dental Program - Maxillofacial Prosthodontics
Utilization Summary^{1,2}

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered ³	920	1,041	1,104	1,088	890	(10.7%)	13.2%	6.1%	(1.4%)	(18.2%)
Amount Paid	\$469,960	\$533,511	\$627,988	\$676,890	\$567,179	4.8%	13.5%	17.7%	7.8%	(16.2%)
Claimants ⁴	390	374	384	382	315	(20.4%)	(4.1%)	2.7%	(0.5%)	(17.5%)
Services Per Claimant	2.4	2.8	2.9	2.8	2.8	12.2%	18.0%	3.3%	(0.9%)	(0.8%)
Paid Per Claimant	\$1,205.03	\$1,426.50	\$1,635.39	\$1,771.96	\$1,800.57	31.7%	18.4%	14.6%	8.4%	1.6%

¹Data is based on date of service.

²Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.

³Services rendered includes laboratory services.

⁴Persons receiving insured services.

Special Dental Program - Cleft Palate**Utilization Summary^{1,2}**

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered ³	1,029	883	984	998	634	27.4%	(14.2%)	11.4%	1.4%	(36.5%)
Amount Paid	\$410,846	\$269,156	\$416,289	\$449,662	\$440,639	46.2%	(34.5%)	54.7%	8.0%	(2.0%)
Claimants ⁴	207	214	211	205	205	13.1%	3.4%	(1.4%)	(2.8%)	0.0%
Services Per Claimant	5.0	4.1	4.7	4.9	3.1	12.6%	(17.0%)	13.0%	4.4%	(36.5%)
Paid Per Claimant	\$1,984.77	\$1,257.74	\$1,972.93	\$2,193.47	\$2,149.46	29.3%	(36.6%)	56.9%	11.2%	(2.0%)

¹Data is based on date of service.²Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.³Services rendered includes laboratory services.⁴Persons receiving insured services.

Nova Scotia Department of Health - Table 5.7
Special Dental Program - Individuals with Special Needs
Utilization Summary^{1,2}

Utilization Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Services Rendered ³	4,650	4,444	4,653	4,750	4,462	18.3%	(4.4%)	4.7%	2.1%	(6.1%)
Amount Paid	\$301,984	\$315,616	\$342,843	\$373,348	\$392,060	15.9%	4.5%	8.6%	8.9%	5.0%
Claimants ⁴	796	787	818	792	738	8.0%	(1.1%)	3.9%	(3.2%)	(6.8%)
Services Per Claimant	5.8	5.6	5.7	6.0	6.0	9.5%	(3.3%)	0.7%	5.4%	0.8%
Paid Per Claimant	\$ 379.38	\$ 401.04	\$ 419.12	\$ 471.40	\$ 531.25	7.4%	5.7%	4.5%	12.5%	12.7%

¹Data is based on date of service.

²Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.

³Services rendered includes laboratory services.

⁴Persons receiving insured services.

Nova Scotia Department of Health - Table 5.8
Special Dental Program - Exceptional Circumstances
Utilization Summary^{1,2}

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered ³	73	132	70	69	69	(12.0%)	80.8%	(47.0%)	(1.4%)	0.0%
Amount Paid	\$93,903	\$57,397	\$66,707	\$42,977	\$59,551	55.2%	(38.9%)	16.2%	(35.6%)	38.6%
Claimants ⁴	12	19	19	11	12	50.0%	58.3%	0.0%	(42.1%)	9.1%
Services Per Claimant	6.1	6.9	3.7	6.3	5.8	(41.4%)	14.2%	(47.0%)	70.3%	(8.3%)
Paid Per Claimant	\$7,825.25	\$3,020.92	\$3,510.87	\$3,907.04	\$4,962.61	3.5%	(61.4%)	16.2%	11.3%	27.0%

¹Data is based on date of service.

²Excludes services from providers funded by the IWK Dental Academic Funding Plan. See Table 5.4 for the IWK Dental Academic Funding Plan services.

³Services rendered includes laboratory services.

⁴Persons receiving insured services.



Section Six

Optometric Services

Optometric Services**Payment and Utilization Summary^{1,2}**

Payment Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Fee-for-Service Payments	\$8,729,884	\$10,035,939	\$10,633,719	\$13,640,881	\$15,729,045	20.5%	15.0%	6.0%	28.3%	15.3%
Pay Patient	\$0	\$0	\$30	\$0	\$0	(>100)	0.0%	0.0%	0.0%	0.0%
Retroactive Payments	\$1,188,718	\$116	\$0	\$1,404,089	\$0	(>100)	(>100)	(>100)	>100	(>100)
Total	\$9,918,602	\$10,036,055	\$10,633,749	\$15,044,970	\$15,729,045	36.9%	1.2%	6.0%	41.5%	4.5%
Utilization Summary										
Services Rendered	171,411	185,614	195,925	209,494	217,297	19.1%	8.3%	5.6%	6.9%	3.7%
Persons Receiving Services(Claimants)	137,067	144,480	152,069	159,478	162,743	16.1%	5.4%	5.3%	4.9%	2.0%

¹ Data is based on date of service.² Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Optometric Programs was updated in the 2022-2023 report and reflected in previously reported years 2018-2019, 2019-2020, 2020-2021 and 2021-2022.



Section Seven

Prosthetic Programs

Prosthetic Programs**Payment Summary¹**

Payment Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Breast ¹	\$137,927	\$151,073	\$262,694	\$272,624	\$258,698	9.8%	9.5%	73.9%	3.8%	(5.1%)
Limb ²	\$961,801	\$1,157,199	\$1,404,714	\$1,578,109	\$1,544,524	(3.5%)	20.3%	21.4%	12.3%	(2.1%)
Ocular ¹	\$157,711	\$141,749	\$147,515	\$416,565	\$444,447	25.8%	(10.1%)	4.1%	182.4%	6.7%
Total Prosthetic Programs Payments	\$1,257,439	\$1,450,021	\$1,814,923	\$2,267,298	\$2,247,669	0.8%	15.3%	15.3%	24.9%	(0.9%)

¹Data is based on date of service.²Data is based on date of invoice.

Prosthetic Programs - Breast Prostheses**Utilization Summary¹**

Utilization Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Services Rendered	806	787	842	873	822	10.6%	(2.4%)	7.0%	3.7%	(5.8%)
Amount Paid	\$137,927	\$151,073	\$262,694	\$272,624	\$258,698	9.8%	9.5%	73.9%	3.8%	(5.1%)
Claimants ²	681	681	735	749	686	6.2%	0.0%	7.9%	1.9%	(8.4%)
Paid Per Service	\$171.1	\$192.0	\$312.0	\$312.3	\$314.7	(0.7%)	12.2%	62.5%	0.1%	0.8%
Services Per Claimant	1.2	1.2	1.1	1.2	1.2	4.1%	(2.4%)	(0.9%)	1.7%	2.8%
Paid Per Claimant	\$202.5	\$221.8	\$357.4	\$364.0	\$377.1	3.3%	9.5%	61.1%	1.8%	3.6%

¹Data is based on date of service.²Persons receiving Insured Services.

Prosthetic Programs - Limb Prostheses**Utilization Summary¹**

Utilization Summary	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Services Rendered	1,938	2,428	2,843	2,988	2,930	(2.9%)	25.3%	17.1%	5.1%	(1.9%)
Amount Paid	\$961,801	\$1,157,199	\$1,404,714	\$1,578,109	\$1,544,524	(3.5%)	20.3%	21.4%	12.3%	(2.1%)
Claimants ²	384	411	440	474	472	(1.0%)	7.0%	7.1%	7.7%	(0.4%)
Services Per Claimant	5.0	5.9	6.5	6.3	6.2	(1.8%)	17.1%	9.4%	(2.4%)	(1.5%)
Paid Per Claimant	\$2,504.7	\$2,815.6	\$3,192.5	\$3,329.3	\$3,272.3	(2.5%)	12.4%	13.4%	4.3%	(1.7%)

¹Data is based on date of invoice.²Persons receiving Insured Services.

Prosthetic Programs - Ocular Prostheses**Utilization Summary¹**

Utilization Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Services Rendered	403	453	537	673	727	67.9%	12.4%	18.5%	25.3%	8.0%
Amount Paid	\$157,711	\$141,749	\$147,515	\$416,565	\$444,447	25.8%	(10.1%)	4.1%	182.4%	6.7%
Claimants ²	276	290	343	377	397	24.9%	5.1%	18.3%	9.9%	5.3%
Paid Per Service	\$391.3	\$312.9	\$274.7	\$619.0	\$611.3	(25.1%)	(20.0%)	(12.2%)	125.3%	(1.2%)
Services Per Claimant	1.5	1.6	1.6	1.8	1.8	34.5%	7.0%	0.2%	14.0%	2.6%
Paid Per Claimant	\$571.4	\$488.8	\$430.1	\$1,104.9	\$1,119.5	0.7%	(14.5%)	(12.0%)	156.9%	1.3%

¹Data is based on date of service.²Persons receiving Insured Services.



Section Eight

Pharmacare Programs

Seniors' Pharmacare Program

Payment and Utilization Summary¹

						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Total Cost of Claims²	\$231,485,810	\$249,600,393	\$274,374,816	\$309,880,521	\$351,399,205	5.3%	7.8%	9.9%	12.9%	13.4%
Total Government Expenditure	\$203,278,249	\$219,702,194	\$243,359,719	\$276,804,846	\$316,858,885	5.7%	8.1%	10.8%	13.7%	14.5%
Utilization Summary										
No. of Seniors ³	215,879	222,727	233,519	238,698	246,752	3.4%	3.2%	4.8%	2.2%	3.4%
Persons Insured ⁴	146,962	151,483	154,124	157,477	161,649	3.0%	3.1%	1.7%	2.2%	2.6%
Claimants ⁵	135,772	139,913	142,925	146,622	150,852	3.0%	3.0%	2.2%	2.6%	2.9%
Percent of Persons Insured	92.4	92.4	92.7	93.1	93.3	(0.0%)	(0.0%)	0.4%	0.4%	0.2%
Total Claims ⁶	4,630,489	4,772,820	4,984,559	5,278,771	5,522,321	(1.5%)	3.1%	4.4%	5.9%	4.6%
Claims Per Insured	31.5	31.5	32.3	33.5	34.2	(4.5%)	(0.0%)	2.6%	3.6%	1.9%
Govt Expenditure Per Insured	\$1,383.2	\$1,450.3	\$1,579.0	\$1,757.7	\$1,960.2	2.5%	4.9%	8.9%	11.3%	11.5%
Claims Per Claimant	34.1	34.1	34.9	36.0	36.6	(4.4%)	0.0%	2.2%	3.2%	1.7%
Govt Expenditure Per Claimant	\$1,497.20	\$1,570.28	\$1,702.71	\$1,887.88	\$2,100.46	2.6%	4.9%	8.4%	10.9%	11.3%

¹Data is based on date of service.²Total Expenditure includes total professional fee paid, total drug cost paid and total upcharge paid. This represents the total expenditure for the Pharmacare programs, not only the Department of Health expenditure.³Estimate of insured persons 65 years & older from Statistics Canada as of July 1st each year.⁴Persons registered in the program at any point during fiscal year.⁵Persons receiving insured services.⁶Includes initial prescription, all refills and pharmacy professional services.

Seniors' Pharmacare Program**Total Drug Utilization¹ by Age**

Age Group²	Claimants³	Number of Claims	Drug Cost	Pharmacists' Fees⁴	Total Cost of Claims⁵	Total Government Expenditure	Claims Per Claimant	Govt Expend Per Claimant
65 - 69	35,288	970,708	\$58,917,098	\$16,906,223	\$75,823,320	\$68,929,108	28	\$1,953.33
70 - 74	38,667	1,251,398	\$70,751,371	\$21,372,748	\$92,124,119	\$83,597,048	32	\$2,161.97
75 - 79	34,576	1,308,953	\$63,962,818	\$21,585,538	\$85,548,356	\$77,329,485	38	\$2,236.51
80 - 84	22,173	968,495	\$39,162,787	\$15,306,007	\$54,468,795	\$49,009,883	44	\$2,210.34
85 - 89	12,305	606,986	\$19,618,312	\$9,249,182	\$28,867,494	\$25,546,288	49	\$2,076.09
90 - 94	5,643	299,079	\$6,641,273	\$4,380,717	\$11,021,990	\$9,504,776	53	\$1,684.35
95 - 99	1,865	99,914	\$1,674,280	\$1,431,180	\$3,105,460	\$2,589,132	54	\$1,388.27
100+	335	16,788	\$205,537	\$234,134	\$439,671	\$353,165	50	\$1,054.22
Total	150,852	5,522,321	\$260,933,476	\$90,465,729	\$351,399,205	\$316,858,885	37	\$2,100.46

¹ Data is based on date of service.² Age as of March 31.³ Persons receiving insured services.⁴ Pharmacists Fees includes Total Professional Fee Paid and Total Upcharge Paid.⁵ This represents the total expenditure for the Seniors Pharmacare program, not only the Department of Health expenditure.

Seniors' Pharmacare Program**Female Drug Utilization¹ by Age****Fiscal Year 2025/26**

			Pharmacists'		Total	Total Government	Claims Per	Govt Expend Per
Age Group ²	Claimants ³	Number of Claims	Drug Cost	Fees ⁴	Cost of Claims ⁵	Expenditure	Claimant	Claimant
65 - 69	19,503	515,364	\$30,622,553	\$8,899,535	\$39,522,088	\$35,785,782	26	\$1,834.89
70 - 74	21,022	657,421	\$34,010,673	\$11,050,624	\$45,061,297	\$40,517,805	31	\$1,927.40
75 - 79	19,053	704,770	\$31,472,905	\$11,350,197	\$42,823,102	\$38,377,371	37	\$2,014.24
80 - 84	12,407	543,734	\$17,965,684	\$8,371,065	\$26,336,750	\$23,346,813	44	\$1,881.75
85 - 89	7,403	370,346	\$10,076,906	\$5,486,065	\$15,562,971	\$13,626,916	50	\$1,840.73
90 - 94	3,782	204,699	\$3,759,814	\$2,944,407	\$6,704,221	\$5,693,263	54	\$1,505.36
95 - 99	1,406	77,942	\$1,079,556	\$1,097,827	\$2,177,383	\$1,778,685	55	\$1,265.07
100+	307	15,599	\$188,509	\$217,149	\$405,657	\$325,848	51	\$1,061.39
Total	84,883	3,089,875	\$129,176,600	\$49,416,869	\$178,593,469	\$159,452,483	36	\$1,878.50

Male Drug Utilization¹ by Age**Fiscal Year 2025/26**

		Number of	Pharmacists'	Total	Total Government	Claims Per	Govt Expend Per	
Age Group ²	Claimants ³	Claims	Drug Cost	Fees ⁴	Cost of Claims ⁵	Expenditure	Claimant	Claimant
65 - 69	15,785	455,344	\$28,294,544	\$8,006,688	\$36,301,232	\$33,143,326	29	\$2,099.67
70 - 74	17,645	593,977	\$36,740,698	\$10,322,124	\$47,062,822	\$43,079,243	34	\$2,441.44
75 - 79	15,523	604,183	\$32,489,913	\$10,235,341	\$42,725,254	\$38,952,114	39	\$2,509.32
80 - 84	9,766	424,761	\$21,197,103	\$6,934,942	\$28,132,045	\$25,663,070	43	\$2,627.80
85 - 89	4,902	236,640	\$9,541,406	\$3,763,117	\$13,304,523	\$11,919,373	48	\$2,431.53
90 - 94	1,861	94,380	\$2,881,459	\$1,436,310	\$4,317,768	\$3,811,513	51	\$2,048.10
95 - 99	459	21,972	\$594,724	\$333,353	\$928,077	\$810,446	48	\$1,765.68
100+	28	1,189	\$17,029	\$16,985	\$34,014	\$27,317	42	\$975.62
Total	65,969	2,432,446	\$131,756,876	\$41,048,860	\$172,805,736	\$157,406,403	37	\$2,386.07

¹ Data is based on date of service.² Age as of March 31.³ Persons receiving insured services.⁴ Pharmacists Fees includes Total Professional Fee Paid and Total Upcharge Paid.⁵ This represents the total expenditure for the Seniors Pharmacare program, not only the Department of Health expenditure.

Seniors' Pharmacare Program**Utilization¹ by Zone of Claimant(Claims)****Fiscal 2024/25 to 2025/26**

Zone	Claimants ²		Percent Change		Claims Count		Percent Change		Claims/Claimant	
	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26
1- Western Zone	37,260	38,387	3.0%	3.0%	1,245,464	1,305,565	6.6%	4.8%	33.4	34.0
2- Northern Zone	25,788	26,500	3.0%	2.8%	983,855	1,030,936	5.7%	4.8%	38.2	38.9
3- Eastern Zone	33,394	34,057	1.9%	2.0%	1,407,028	1,457,346	5.6%	3.6%	42.1	42.8
4 - Central Zone	50,731	52,540	2.8%	3.6%	1,639,838	1,727,994	5.8%	5.4%	32.3	32.9
Unknown	291	30	7.0%	(89.7%)	2,586	480	(44.4%)	(81.4%)	8.9	16.0
Total	146,622	150,852	2.6%	2.9%	5,278,771	5,522,321	5.9%	4.6%	36.0	36.6

¹ Data is based on date of service.² Persons receiving insured services. Column totals may not add to totals as residents may be counted in more than one zone.

Nova Scotia Department of Health - Table 8.5
Seniors' Pharmacare Program
Utilization¹ by Zone of Claimant(Expenditure)
Fiscal 2024/25 to 2025/26

Zone	Claimants ²		Total Cost of Claims ³		Total Government Expenditure		Percent Change		Govt Expend/Claimant	
	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26
1- Western Zone	37,260	38,387	\$75,942,718	\$86,225,150	\$67,488,241	\$77,417,458	15.4%	14.7%	\$1,811.28	\$2,016.76
2- Northern Zone	25,788	26,500	\$52,081,772	\$59,769,724	\$46,041,265	\$53,545,914	12.4%	16.3%	\$1,785.38	\$2,020.60
3- Eastern Zone	33,394	34,057	\$77,389,986	\$84,300,427	\$69,540,673	\$76,184,465	11.6%	9.6%	\$2,082.43	\$2,236.97
4 - Central Zone	50,731	52,540	\$104,244,662	\$121,062,970	\$93,532,830	\$109,674,009	14.9%	17.3%	\$1,843.70	\$2,087.44
Unknown	291	30	\$221,383	\$40,934	\$201,837	\$37,039	4.8%	(81.6%)	\$693.60	\$1,234.65
Total	146,622	150,852	\$309,880,521	\$351,399,205	\$276,804,846	\$316,858,885	13.7%	14.5%	\$1,887.88	\$2,100.46

¹ Data is based on date of service.

² Persons receiving insured services. Column totals may not add to totals as residents may be counted in more than one zone

³ This represents the total expenditure for the Seniors Pharmacare program, not only the Department of Health expenditure.

Nova Scotia Department of Health - Table 8.6
Special Funding Assistance Programs for Residents
Payment Summary¹

Payment Summary						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Cystic Fibrosis ²										
- drugs	\$9,146,740	\$28,850,639	\$33,168,488	\$39,661,652	\$40,774,222	363.1%	215.4%	15.0%	19.6%	2.8%
- equipment & emergency	\$18,742	\$21,183	\$20,860	\$20,663	\$13,685	(46.2%)	13.0%	(1.5%)	(0.9%)	(33.8%)
Subtotal Cystic Fibrosis	\$9,165,482	\$28,871,822	\$33,189,348	\$39,682,315	\$40,787,907	356.1%	215.0%	15.0%	19.6%	2.8%
Diabetes Insipidus	\$112,315	\$94,974	\$99,531	\$103,111	\$101,000	(3.6%)	(15.4%)	4.8%	3.6%	(2.0%)
Cancer	\$4,280,786	\$5,804,634	\$8,875,042	\$10,372,053	\$10,906,205	2.6%	35.6%	52.9%	16.9%	5.1%
Growth Hormone Deficiency	\$488,052	\$460,605	\$520,379	\$483,713	\$477,062	1.4%	(5.6%)	13.0%	(7.0%)	(1.4%)
HIV/AIDS Program	\$13,555	\$13,798	\$13,908	\$10,365	\$15,482	(46.3%)	1.8%	0.8%	(25.5%)	49.4%
MS Copayment Program	\$12,899	\$3,535	\$7,336	\$0	\$0	82.0%	(72.6%)	107.5%	(100.0%)	0.0%
Total Special Assistance Programs	\$14,073,089	\$35,249,368	\$42,705,544	\$50,651,557	\$52,287,656	106.6%	150.5%	21.2%	18.6%	3.2%

¹ Data is based on date of invoice for manual claims and date of service for electronic claims.

² Fiscal years 2021-22 onward reflect the addition of coverage under the program for a new high-cost drug.

Nova Scotia Department of Health - Table 8.7
Special Funding Assistance Programs for Residents with Cystic Fibrosis
Utilization Summary^{1,2}

Program Expenditure						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Drugs ⁵	\$9,146,740	\$28,850,639	\$33,168,488	\$39,661,652	\$40,774,222	363.1%	215.4%	15.0%	19.6%	2.8%
Equipment and Emergency	\$18,742	\$21,183	\$20,860	\$20,663	\$13,685	(46.2%)	13.0%	(1.5%)	(0.9%)	(33.8%)
Total Program Expenditure	\$9,165,482	\$28,871,822	\$33,189,348	\$39,682,315	\$40,787,907	356.1%	215.0%	15.0%	19.6%	2.8%
Utilization Summary										
Claimants ³	177	178	185	186	192	2.9%	0.5%	3.9%	0.5%	3.2%
Expenditure Per Claimant ⁴	\$51,782.38	\$162,201.24	\$179,289.12	\$213,234.69	\$212,365.74	350.9%	213.2%	10.5%	18.9%	(0.4%)

¹ Data is based on date of invoice for manual claims and date of service for electronic claims.

² Reporting requirements are reviewed on an annual basis and, subsequently, the reporting methodology for Special Funding program was updated in the 2023-2024 report and reflected in previously reported years 2021-2022 and 2022-2023.

³ Persons receiving insured services.

⁴ Per Claimant expenditure excludes dollar value for equipment.

⁵ Fiscal years 2021-22 onward reflect the addition of coverage under the program for a new high-cost drug.

Nova Scotia Department of Health - Table 8.8
Special Funding Assistance Programs for Residents with Diabetes Insipidus
Utilization Summary¹

	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Program Expenditure	\$112,315	\$94,974	\$103,111	\$103,111	\$101,000	(3.6%)	(15.4%)	4.8%	0.0%	(2.0%)
Utilization Summary										
Claimants ²	81	84	86	87	83	3.8%	3.7%	2.4%	1.2%	(4.6%)
Expenditure Per Claimant	\$1,386.60	\$1,130.64	\$1,198.97	\$1,185.18	\$1,216.87	(7.2%)	(18.5%)	2.4%	(1.1%)	2.7%

¹ Data is based on date of invoice.

² Persons receiving insured services.

Nova Scotia Department of Health - Table 8.9
Special Funding Assistance Programs for Residents with Cancer
Utilization Summary^{1,2}

	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Program Expenditure	\$4,280,786	\$5,804,634	\$8,875,042	\$10,372,053	\$10,906,205	2.6%	35.6%	52.9%	16.9%	5.1%
Utilization Summary										
Claimants ²	1248	1641	1978	2206	2394	22.2%	31.5%	20.5%	11.5%	8.5%
Expenditure Per Claimant	\$3,430.12	\$3,537.25	\$4,486.88	\$4,701.75	\$4,555.64	(16.0%)	3.1%	26.8%	4.8%	(3.1%)

¹ Data is based on date of service.

² Persons receiving insured services.

Nova Scotia Department of Health - Table 8.10
Special Funding Assistance Programs for Residents with Growth Hormone Deficiency
Utilization Summary¹

	2021/22	2022/23	2023/24	2024/25	2025/26	Percent Change				
						21/22	22/23	23/24	24/25	25/26
Program Expenditure	\$488,052	\$460,605	\$520,379	\$483,713	\$477,062	1.4%	(5.6%)	13.0%	(7.0%)	(1.4%)
Utilization Summary										
Claimants ²	39	39	40	37	34	(2.5%)	0.0%	2.6%	(7.5%)	(8.1%)
Expenditure Per Claimant	\$12,514.15	\$11,810.38	\$13,009.48	\$13,073.32	\$14,031.24	4.0%	(5.6%)	10.2%	0.5%	7.3%

¹ Data is based on date of invoice.

² Persons receiving insured services.

Family Pharmacare Program

Payment and Utilization Summary¹

						Percent Change				
	2021/22	2022/23	2023/24	2024/25	2025/26	21/22	22/23	23/24	24/25	25/26
Total Cost of Claims²	\$77,561,947	\$69,749,558	\$71,038,954	\$82,328,555	\$90,076,723	8.8%	(10.1%)	1.8%	15.9%	9.4%
Total Government Expenditure	\$55,527,724	\$47,626,084	\$49,426,017	\$58,253,875	\$63,209,970	7.2%	(14.2%)	3.8%	17.9%	8.5%
Persons Insured ³	39,942	38,368	37,283	38,640	39,483	1.0%	(3.9%)	(2.8%)	3.6%	2.2%
Claimants ⁴	25,780	24,646	23,800	24,821	24,932	3.0%	(4.4%)	(3.4%)	4.3%	0.4%
Percent of Persons Insured	64.5	64.2	63.8	64.2	63.1	2.0%	(0.5%)	(0.6%)	0.6%	(1.7%)
Total Claims ⁵	700,609	617,008	584,131	606,674	607,762	5.1%	(11.9%)	(5.3%)	3.9%	0.2%
Claims Per Insured	17.5	16.1	15.7	15.7	15.4	4.1%	(8.3%)	(2.6%)	0.2%	(2.0%)
Govt Expenditure Per Insured	\$1,390.2	\$1,241.3	\$1,325.7	\$1,507.6	\$1,600.9	6.2%	(10.7%)	6.8%	13.7%	6.2%
Claims Per Claimant	27.2	25.0	24.5	24.4	24.4	2.0%	(7.9%)	(2.0%)	(0.4%)	(0.3%)
Govt Expenditure Per Claimant	\$2,153.91	\$1,932.41	\$2,076.72	\$2,346.96	\$2,535.29	4.1%	(10.3%)	7.5%	13.0%	8.0%

¹Data is based on date of service.²Total Expenditure includes total professional fee paid, total drug cost paid and total upcharge paid. This represents the total expenditure for the Family Pharmacare program, not on the Department of Health expenditure.³Persons registered in program at any point during fiscal year.⁴Persons receiving insured services.⁵Includes initial prescription, all refills and pharmacy professional services.

Family Pharmacare Program**Total Drug Utilization¹ by Age****Fiscal 2025/26**

Age Group²	Claimants³	Number of Claims	Drug Cost	Pharmacists' Fees⁴	Total Cost of Claims⁵	Total Government Expenditure	Claims Per Claimant	Govt Expend Per Claimant
0-4	296	956	\$136,078	\$18,530	\$154,609	\$109,713	3	\$370.65
5-9	583	2,961	\$624,647	\$56,530	\$681,176	\$528,101	5	\$905.83
10-14	780	5,478	\$626,357	\$102,717	\$729,073	\$511,459	7	\$655.72
15-19	946	7,110	\$1,392,849	\$150,521	\$1,543,370	\$1,330,959	8	\$1,406.93
20-24	1,055	12,932	\$3,169,572	\$426,033	\$3,595,605	\$3,076,121	12	\$2,915.75
25-29	1,308	24,151	\$6,212,962	\$715,572	\$6,928,534	\$5,440,767	18	\$4,159.61
30-34	1,372	29,870	\$6,732,717	\$787,839	\$7,520,557	\$5,672,822	22	\$4,134.71
35-39	1,436	40,196	\$4,904,438	\$878,928	\$5,783,365	\$3,864,287	28	\$2,691.01
40-44	1,560	39,160	\$6,677,850	\$880,411	\$7,558,261	\$5,750,657	25	\$3,686.32
45-49	1,710	42,360	\$6,339,346	\$996,515	\$7,335,861	\$5,158,371	25	\$3,016.59
50-54	2,153	54,974	\$7,560,381	\$1,278,730	\$8,839,111	\$5,896,329	26	\$2,738.66
55-59	3,045	92,144	\$9,734,643	\$1,897,407	\$11,632,050	\$7,798,094	30	\$2,560.95
60-64	6,035	190,929	\$17,527,063	\$3,730,484	\$21,257,547	\$14,258,131	32	\$2,362.57
65+	2,653	64,541	\$5,334,700	\$1,182,904	\$6,517,604	\$3,814,158	24	\$1,437.68
Total	24,932	607,762	\$76,973,602	\$13,103,121	\$90,076,723	\$63,209,970	24	\$2,535.29

¹ Data is based on date of service.² Age as of March 31.³ Persons receiving insured services.⁴ Pharmacists Fees includes Total Professional Fee Paid and Total Upcharge Paid.⁵ This represents the total expenditure for the Family Pharmacare program, not only the Department of Health expenditure.

Nova Scotia Department of Health - Table 8.13

**Family Pharmacare Program
Female Drug Utilization¹ by Age
Fiscal Year 2025/26**

Age Group²	Claimants³	Number of Claims	Drug Cost	Pharmacists' Fees⁴	Total Cost of Claims⁵	Total Government Expenditure	Claims Per Claimant	Govt Expend Per Claimant
0-4	147	512	76,494	\$11,366	\$87,860	\$55,380	3	\$376.73
5-9	251	1,091	48,031	\$17,550	\$65,581	\$42,194	4	\$168.10
10-14	335	2,162	439,274	\$46,002	\$485,276	\$377,488	6	\$1,126.83
15-19	536	3,863	381,330	\$81,276	\$462,605	\$345,529	7	\$644.64
20-24	658	8,766	1,861,129	\$266,569	\$2,127,698	\$1,836,875	13	\$2,791.60
25-29	759	12,116	2,789,466	\$380,201	\$3,169,667	\$2,307,037	16	\$3,039.57
30-34	816	15,354	4,405,904	\$434,946	\$4,840,849	\$3,768,760	19	\$4,618.58
35-39	827	16,838	2,781,248	\$419,617	\$3,200,865	\$2,077,561	20	\$2,512.17
40-44	949	22,389	4,397,960	\$513,504	\$4,911,464	\$3,820,263	24	\$4,025.57
45-49	1,010	22,906	3,454,673	\$560,075	\$4,014,749	\$2,834,496	23	\$2,806.43
50-54	1,255	31,745	4,304,133	\$733,230	\$5,037,363	\$3,362,675	25	\$2,679.42
55-59	1,791	52,087	6,139,587	\$1,100,220	\$7,239,807	\$4,932,414	29	\$2,754.00
60-64	3,474	104,305	9,663,617	\$2,004,531	\$11,668,149	\$7,785,320	30	\$2,241.02
65+	1,372	33,072	2,613,692	\$595,524	\$3,209,216	\$1,756,061	24	\$1,279.93
Total	14,180	327,206	\$43,356,537	\$7,164,611	\$50,521,148	\$35,302,053	23	\$2,489.57

¹ Data is based on date of service.

² Age as of March 31.

³ Persons receiving insured services.

⁴ Pharmacists Fees includes Total Professional Fee Paid and Total Upcharge Paid.

⁵ This represents the total expenditure for the Family Pharmacare program, not only the Department of Health expenditure.

Nova Scotia Department of Health - Table 8.13

Family Pharmacare Program
Male Drug Utilization¹ by Age
Fiscal Year 2025/26

Age Group ²	Claimants ³	Number of Claims	Drug Cost	Pharmacists' Fees ⁴	Total Cost of Claims ⁵	Total Government Expenditure	Claims Per Claimant	Govt Expend Per Claimant
0-4	149	444	59,584	\$7,164	\$66,748	\$54,333	3	\$364.65
5-9	332	1,870	576,616	\$38,980	\$615,596	\$485,907	6	\$1,463.58
10-14	445	3,316	187,083	\$56,714	\$243,797	\$133,971	7	\$301.06
15-19	410	3,247	1,011,519	\$69,246	\$1,080,765	\$985,430	8	\$2,403.49
20-24	397	4,166	1,308,443	\$159,464	\$1,467,907	\$1,239,246	10	\$3,121.53
25-29	549	12,035	3,423,496	\$335,372	\$3,758,868	\$3,133,730	22	\$5,708.07
30-34	556	14,516	2,326,813	\$352,894	\$2,679,707	\$1,904,063	26	\$3,424.57
35-39	609	23,358	2,123,190	\$459,311	\$2,582,501	\$1,786,726	38	\$2,933.87
40-44	611	16,771	2,279,890	\$366,908	\$2,646,797	\$1,930,395	27	\$3,159.40
45-49	700	19,454	2,884,673	\$436,439	\$3,321,112	\$2,323,875	28	\$3,319.82
50-54	898	23,229	3,256,248	\$545,500	\$3,801,748	\$2,533,654	26	\$2,821.44
55-59	1,254	40,057	3,595,056	\$797,187	\$4,392,243	\$2,865,681	32	\$2,285.23
60-64	2,561	86,624	7,863,446	\$1,725,953	\$9,589,399	\$6,472,810	34	\$2,527.45
65+	1,281	31,469	2,721,008	\$587,380	\$3,308,388	\$2,058,097	25	\$1,606.63
Total	10,752	280,556	\$33,617,065	\$5,938,510	\$39,555,575	\$27,907,917	26	\$2,595.60

¹ Data is based on date of service.² Age as of March 31.³ Persons receiving insured services.⁴ Pharmacists Fees includes Total Professional Fee Paid and Total Upcharge Paid.⁵ This represents the total expenditure for the Family Pharmacare program, not only the Department of Health expenditure.

Family Pharmacare Program**Utilization¹ by Zone of Claimant (Claims)****Fiscal 2024/25 to 2025/26**

Zone	Claimants ²		Percent Change		Claims Count		Percent Change		Claims/Claimant	
	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26
1- Western Zone	7,344	7,349	3.3%	0.1%	173,099	173,882	4.4%	0.5%	23.6	23.7
2- Northern Zone	4,453	4,406	5.7%	(1.1%)	113,179	112,939	5.9%	(0.2%)	25.4	25.6
3- Eastern Zone	4,362	4,251	5.3%	(2.5%)	134,126	134,970	(0.3%)	0.6%	30.7	31.8
4 - Central Zone	8,804	9,027	4.6%	2.5%	185,334	185,836	4.9%	0.3%	21.1	20.6
Unknown	59	14	73.5%	(76.3%)	936	135	140.6%	(85.6%)	15.9	9.6
Total	24,821	24,932	4.3%	0.4%	606,674	607,762	3.9%	0.2%	24.4	24.4

¹ Data is based on date of service.² Persons receiving insured services. Column totals may not add to totals as residents may be counted in more than one zone.

Nova Scotia Department of Health - Table 8.15
Family Pharmacare Program
Utilization¹ by Zone of Claimant (Expenditure)
Fiscal 2024/25 to 2025/26

Zone	Claimants ²		Total Cost of Claims ³		Total Government Expenditure		Percent Change		Govt Expend/Claimant	
	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26	24/25	25/26
1- Western Zone	7,344	7,349	\$23,488,342	\$24,534,932	\$16,446,348	\$16,596,022	23.4%	4.5%	\$2,239.43	\$2,258.27
2- Northern Zone	4,453	4,406	\$13,187,939	\$14,123,753	\$9,052,709	\$9,909,558	16.8%	7.1%	\$2,032.95	\$2,249.11
3- Eastern Zone	4,362	4,251	\$15,312,010	\$16,986,311	\$11,126,491	\$12,004,970	13.2%	10.9%	\$2,550.78	\$2,824.03
4 - Central Zone	8,804	9,027	\$30,300,396	\$34,427,912	\$21,599,471	\$24,696,780	11.6%	13.6%	\$2,453.37	\$2,735.88
Unknown	59	14	\$39,867	\$3,816	\$28,855	\$2,639	(5.6%)	(90.4%)	\$489.08	\$188.50
Total	24,821	24,932	\$82,328,555	\$90,076,723	\$58,253,875	\$63,209,970	15.9%	9.4%	\$2,346.96	\$2,535.29

¹ Data is based on date of service.

² Persons receiving insured services. Column totals may not add to totals as residents may be counted in more than one zone.

³ This represents the total expenditure for the Family Pharmacare program, not only the Department of Health expenditure.