Prism Spectra® - Monthly Rates Effective April 1, 2018 Rates and/or benefits are subject to change with thirty (30) days notice to the applicant/policyholder.

NOTE: Prism Spectra Monthly Rates do not include the Optional Hospital Accommodation benefit. Please refer to the Optional Hospital rate table for the additional premium required.

S1	BC AI			AB		SK, N	IB, NT, YT, NU		ON			QC			NB, NS, PE, NL			
Age	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
0-44	\$44	\$81	\$111	\$53	\$100	\$138	\$44	\$81	\$111	\$62	\$118	\$158	NA	NA	NA	\$60	\$114	\$157
45-54	\$49	\$92	\$130	\$62	\$118	\$162	\$49	\$92	\$130	\$71	\$136	\$187	NA	NA	NA	\$69	\$130	\$183
55-64	\$61	\$114	\$159	\$74	\$139	\$196	\$61	\$114	\$159	\$88	\$168	\$232	NA	NA	NA	\$83	\$160	\$224
65+	\$42	\$75	\$92	\$51	\$95	\$117	\$42	\$75	\$92	\$85	\$161	\$194	NA	NA	NA	\$54	\$102	\$123

S2

Age	Single	Couple	Family															
0-44	\$92	\$170	\$244	\$98	\$186	\$268	\$75	\$141	\$202	\$111	\$210	\$303	NA	NA	NA	\$94	\$180	\$258
45-54	\$98	\$185	\$267	\$109	\$205	\$299	\$82	\$157	\$222	\$120	\$236	\$336	NA	NA	NA	\$107	\$203	\$285
55-64	\$111	\$212	\$305	\$123	\$233	\$339	\$93	\$174	\$251	\$142	\$270	\$391	NA	NA	NA	\$122	\$233	\$332
65+	\$88	\$166	\$221	\$98	\$182	\$247	\$71	\$134	\$179	\$136	\$257	\$326	NA	NA	NA	\$89	\$169	\$220

S3

Age	Single	Couple	Family															
0-44	\$117	\$221	\$304	\$131	\$248	\$336	\$98	\$188	\$244	\$142	\$271	\$359	NA	NA	NA	\$130	\$247	\$327
45-54	\$123	\$236	\$327	\$139	\$265	\$361	\$102	\$199	\$266	\$153	\$293	\$388	NA	NA	NA	\$140	\$266	\$355
55-64	\$145	\$278	\$371	\$166	\$311	\$414	\$122	\$240	\$307	\$185	\$350	\$448	NA	NA	NA	\$171	\$320	\$409
65+	\$111	\$211	\$287	\$124	\$233	\$311	\$92	\$173	\$223	\$185	\$354	\$431	NA	NA	NA	\$119	\$225	\$292

S4

Age	Single	Couple	Family															
0-44	\$133	\$246	\$340	\$145	\$276	\$375	\$108	\$206	\$272	\$165	\$314	\$412	NA	NA	NA	\$145	\$271	\$361
45-54	\$138	\$264	\$364	\$156	\$293	\$400	\$114	\$218	\$294	\$176	\$335	\$444	NA	NA	NA	\$155	\$289	\$390
55-64	\$162	\$309	\$407	\$181	\$341	\$456	\$135	\$262	\$335	\$209	\$397	\$508	NA	NA	NA	\$185	\$348	\$446
65+	\$133	\$244	\$330	\$142	\$266	\$362	\$107	\$200	\$267	\$210	\$403	\$491	NA	NA	NA	\$138	\$258	\$340

Optional Hospital Accommodation Monthly Rates Rates and/or benefits are subject to change with thirty (30) days notice to the applicant/policyholder.

NOTE: The appropriate monthly rate below must be added to one of the plans above (S1, S2, S3 or S4) if you wish to purchase the Optional Hospital Accommodation as a benefit.

Age	Single	Couple	Family															
0-44	\$4	\$6	\$8	\$5	\$7	\$9	\$4	\$6	\$8	\$6	\$8	\$12	NA	NA	NA	\$5	\$7	\$11
45-54	\$6	\$8	\$10	\$7	\$9	\$11	\$6	\$8	\$10	\$8	\$10	\$12	NA	NA	NA	\$7	\$9	\$11
55-64	\$10	\$10	\$12	\$9	\$11	\$16	\$8	\$10	\$12	\$10	\$12	\$16	NA	NA	NA	\$9	\$11	\$16
65+	\$12	\$20	\$23	\$18	\$25	\$29	\$12	\$20	\$23	\$19	\$29	\$33	NA	NA	NA	\$18	\$25	\$29

Coverage provided by

