# Prism Precision® - Monthly Rates Effective April 1, 2017 Rates and/or benefits are subject to change with thirty (30) days notice to the applicant/policyholder.

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

P1	ВС			АВ			SK, MB, 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	\$23	\$44	\$54	\$30	\$56	\$72	\$23	\$44	\$54	\$32	\$59	\$76	\$33	\$61	\$78	\$32	\$59	\$76
45-54	\$24	\$46	\$58	\$33	\$61	\$78	\$24	\$46	\$58	\$34	\$63	\$82	\$35	\$66	\$85	\$34	\$63	\$82
55-64	\$25	\$48	\$61	\$34	\$63	\$82	\$25	\$48	\$61	\$36	\$69	\$90	\$37	\$72	\$92	\$36	\$69	\$90
65+	\$32	\$61	\$75	\$40	\$77	\$97	\$32	\$61	\$75	\$44	\$82	\$105	\$45	\$86	\$106	\$44	\$82	\$105

## **P2**

Age	Single	Couple	Family															
0-44	\$48	\$92	\$131	\$53	\$98	\$141	\$39	\$73	\$104	\$59	\$110	\$157	\$52	\$93	\$130	\$52	\$96	\$138
45-54	\$51	\$95	\$135	\$55	\$103	\$144	\$41	\$77	\$109	\$61	\$115	\$165	\$54	\$97	\$136	\$53	\$98	\$140
55-64	\$53	\$98	\$141	\$57	\$106	\$151	\$44	\$81	\$113	\$65	\$122	\$172	\$56	\$104	\$143	\$55	\$103	\$144
65+	\$60	\$111	\$153	\$65	\$121	\$169	\$52	\$96	\$127	\$72	\$136	\$189	\$64	\$117	\$163	\$63	\$117	\$160

## P3

Age	Single	Couple	Family															
0-44	\$71	\$134	\$203	\$75	\$143	\$211	\$51	\$97	\$145	\$79	\$149	\$221	\$73	\$142	\$205	\$65	\$123	\$179
45-54	\$75	\$141	\$211	\$79	\$151	\$220	\$55	\$104	\$153	\$83	\$157	\$234	\$75	\$144	\$209	\$67	\$128	\$185
55-64	\$76	\$143	\$214	\$82	\$157	\$228	\$56	\$106	\$156	\$85	\$162	\$240	\$78	\$145	\$213	\$70	\$133	\$195
65+	\$82	\$153	\$225	\$87	\$168	\$238	\$62	\$116	\$167	\$90	\$172	\$250	\$83	\$155	\$223	\$75	\$144	\$206

### **P4**

Age	Single	Couple	Family															
0-44	\$88	\$164	\$248	\$92	\$178	\$261	\$64	\$121	\$179	\$97	\$185	\$275	\$91	\$177	\$255	\$80	\$152	\$225
45-54	\$93	\$174	\$261	\$97	\$187	\$273	\$69	\$131	\$192	\$103	\$197	\$292	\$93	\$181	\$260	\$85	\$160	\$231
55-64	\$94	\$177	\$265	\$101	\$197	\$284	\$70	\$134	\$197	\$105	\$203	\$301	\$95	\$182	\$266	\$89	\$169	\$246
65+	\$101	\$190	\$279	\$108	\$210	\$298	\$77	\$147	\$211	\$114	\$216	\$314	\$102	\$196	\$281	\$96	\$183	\$261

### 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 (P1, P2, P3 or P4) 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	\$11	\$7	\$9	\$11	\$5	\$7	\$10
45-54	\$6	\$8	\$10	\$7	\$9	\$11	\$6	\$8	\$10	\$8	\$10	\$12	\$9	\$11	\$13	\$7	\$9	\$11
55-64	\$9	\$10	\$12	\$9	\$11	\$15	\$8	\$10	\$12	\$10	\$12	\$16	\$11	\$13	\$16	\$9	\$11	\$15
65+	\$12	\$19	\$22	\$17	\$24	\$28	\$12	\$19	\$22	\$19	\$28	\$32	\$20	\$29	\$34	\$17	\$24	\$28