## Prism Precision<sup>®</sup> - Monthly Rates Effective April 1, 2020 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	-						·			· · · · · ·						· ·		
	BC			AB			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
<45	\$28	\$51	\$64	\$36	\$66	\$85	\$26	\$50	\$61	\$36	\$66	\$86	NA	NA	NA	\$36	\$67	\$87
45-54	\$30	\$55	\$68	\$39	\$71	\$92	\$27	\$52	\$66	\$38	\$70	\$92	NA	NA	NA	\$39	\$71	\$93
55-64	\$31	\$57	\$71	\$41	\$75	\$97	\$28	\$54	\$69	\$41	\$77	\$100	NA	NA	NA	\$42	\$78	\$102
65+	\$39	\$75	\$90	\$48	\$93	\$117	\$38	\$73	\$88	\$51	\$95	\$120	NA	NA	NA	\$51	\$97	\$122
<b>P2</b>																		
Age	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
<45	\$56	\$105	\$150	\$60	\$108	\$158	\$44	\$81	\$116	\$67	\$125	\$172	NA	NA	NA	\$60	\$108	\$156
45-54	\$60	\$108	\$155	\$62	\$114	\$161	\$46	\$87	\$123	\$69	\$130	\$181	NA	NA	NA	\$61	\$111	\$158
55-64	\$62	\$112	\$162	\$64	\$117	\$168	\$49	\$91	\$127	\$73	\$138	\$188	NA	NA	NA	\$63	\$116	\$164
65+	\$70	\$130	\$178	\$74	\$138	\$191	\$59	\$111	\$145	\$81	\$153	\$212	NA	NA	NA	\$72	\$135	\$182
P3																		
Age	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
<45	\$84	\$158	\$238	\$86	\$164	\$243	\$58	\$112	\$165	\$89	\$167	\$246	NA	NA	NA	\$75	\$140	\$204
45-54	\$88	\$166	\$248	\$90	\$173	\$253	\$63	\$120	\$175	\$93	\$175	\$262	NA	NA	NA	\$78	\$147	\$211
55-64	\$89	\$168	\$252	\$95	\$181	\$263	\$64	\$122	\$178	\$95	\$181	\$268	NA	NA	NA	\$81	\$152	\$223
65+	\$99	\$183	\$266	\$101	\$194	\$274	\$73	\$136	\$193	\$101	\$194	\$280	NA	NA	NA	\$88	\$169	\$239
<b>P4</b>																		
Age	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
<45	\$104	\$192	\$291	\$107	\$206	\$302	\$74	\$141	\$208	\$110	\$207	\$308	NA	NA	NA	\$90	\$172	\$254
45-54	\$109	\$205	\$307	\$112	\$216	\$316	\$80	\$153	\$224	\$116	\$220	\$328	NA	NA	NA	\$96	\$180	\$260
55-64	\$110	\$208	\$311	\$117	\$228	\$329	\$81	\$156	\$229	\$118	\$227	\$337	NA	NA	NA	\$101	\$190	\$277
65+	\$121	\$227	\$331	\$127	\$247	\$350	\$91	\$173	\$247	\$129	\$243	\$353	NA	NA	NA	\$110	\$211	\$298
	Optio	nal Hosp	oital Acc	commod	lation M	onthly R	ates Ra	ates and/or	benefits are	e subject to	change wit	h thirty (30	) days noti	ce to the <u>ap</u>	plicant/poli	cyholder.		
	NOTE: 1	he approp	riate mont	hly rate b	elow must	be added	to one of	the plans a	bove (P1,	P2, P3 or	P4) if you	wish to pu	rchase th	e Optional	Hospital A	ccommod	ation as a	benefit.
Age	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
<45	\$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	\$17	\$8	\$10	\$13	\$10	\$12	\$17	NA	NA	NA	\$9	\$11	\$17

\$12 Coverage provided by

65+

**Green Shield Canada** 

\$21

\$24

\$19

\$26

\$30

\$13

\$21

\$24

\$20

\$30

\$34

NA

NA

NA

\$19



\$26

\$30