

Family Status definitions: single rate is for 1 person, couple rate is for 2 persons, and family rate is for 3 or more persons. The oldest person on the application determines the age band and rate. Prices do not include PST.

Conversion Monthly Premiums

AGE	FAMILY STATUS	CORE HEALTH	PRESCRIPTION DRUG	DENTAL	HOSPITAL CASH	VIP
Under 35	Single	14.05	10.15	27.30	2.00	1.85
	Couple	28.15	20.45	54.90	3.00	3.70
	Family	34.95	31.45	80.95	5.00	3.70
35-44	Single	15.35	15.20	27.30	2.75	2.90
	Couple	30.60	24.10	54.90	4.25	5.80
	Family	36.80	40.20	80.95	5.50	5.80
45-54	Single	17.80	30.65	27.30	3.00	4.35
	Couple	35.65	44.85	54.90	5.75	8.70
	Family	44.00	60.55	80.95	6.25	8.70
55-64	Single	20.30	40.15	27.30	5.00	5.10
	Couple	40.60	72.55	54.90	7.50	10.20
	Family	49.05	109.40	80.95	8.25	10.20
65-74	Single	25.85	33.65	27.30	10.00	8.80
	Couple	51.75	56.80	54.90	14.00	17.60
	Family	76.70	84.10	80.95	18.00	17.60
75-84	Single	28.70	33.65	27.30	12.00	13.90
	Couple	57.35	67.65	54.90	16.00	27.80
	Family	86.05	102.00	80.95	20.00	27.80
85+	Single	31.15	33.65	27.30	14.00	13.90
	Couple	62.35	67.65	54.90	18.00	27.80
	Family	92.35	102.00	80.95	22.00	27.80

Term Life Insurance

Both applicant and spouse must be non-smokers to qualify for the non-smoker couple premium.

AGE		\$25,000		\$50,000		\$75,000		\$100,000		\$10,000
		SINGLE	COUPLE	SINGLE	COUPLE	SINGLE	COUPLE	SINGLE	COUPLE	CHILDREN
Under 35	Non-smoker	2.90	4.50	5.80	9.00	8.70	13.50	11.60	18.00	3.35
	Smoker	4.40	6.90	8.80	13.80	13.20	20.70	17.60	27.60	3.35
35-44	Non-smoker	4.60	8.10	9.20	16.20	13.80	24.30	18.40	32.40	3.35
	Smoker	7.00	12.40	14.00	24.80	21.00	37.20	28.00	49.60	3.35
45-54	Non-smoker	11.30	18.80	22.60	37.60	33.90	56.40	45.20	75.20	3.35
	Smoker	17.20	28.70	34.40	57.40	51.60	86.10	68.80	114.80	3.35
55-64	Non-smoker	25.40	41.40	50.80	82.80	76.20	124.20	101.60	165.60	3.35
	Smoker	38.90	63.30	77.80	126.60	116.70	189.90	155.60	253.20	3.35
65-69	Non-smoker	45.50	74.40	91.00	148.80	136.50	223.20	182.00	297.60	3.35
	Smoker	69.60	113.80	139.20	227.60	208.80	341.40	278.40	455.20	3.35

Critical Illness

AGE	SINGLE		COUPLE		FAMILY	
	\$10,000	\$25,000	\$10,000	\$25,000	\$10,000	\$25,000
	LEVEL 1	LEVEL 2	LEVEL 1	LEVEL 2	LEVEL 1	LEVEL 2
Under 35	0.50	1.25	0.75	2.00	1.00	2.50
35-44	1.00	2.50	2.00	5.00	2.50	5.50
45-54	3.00	6.50	5.50	13.50	6.00	14.00
55-64	8.50	21.00	15.00	37.00	16.00	38.00

Student Accident Insurance

Monthly Premiums

Single Student\$0.50
Family (3 or more students)\$1.25

Optional Life Insurance

Applicable to Student Accident Option only

\$5,000\$0.35 per student
OR	
\$10,000\$0.75 per student

Double-Up \$0.20 per student
 Double indemnity for accidental dismemberment and for total and permanent disability.

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