

These rates do not include sales tax and are subject to change without notice.

10 01 RTR ECA 0119 WEISS

## A – Instructions

- The minimum premium is \$25 per person, per plan.
- Coverage beyond 182 days (or any number of days allowed in your province or territory of residence) is available provided sufficient documentation is received. Contact your broker or sales agent for more information.
- For Emergency Medical Travel Insurance:**
  - Your Single Trip Daily rate is based on your age as of the **purchase date** and the **total trip duration** (including the departure and return dates).
  - If you are topping up an existing plan (or a Multi-Trip Annual Plan), your Top Up rate is based on your **total trip duration** and multiplied by the number of top up days.
  - Applicants age 60 or over: please complete the Application Age 60 or over to determine which Plan type you qualify for.
- For Non-Medical Travel Insurance:**
  - If you are topping up a Non-Medical Multi-Trip Annual Plan to cover days in excess of the number of days allowed, contact your broker or sales agent for the applicable rates.

## B – Plans without Medical Questionnaire

### EMERGENCY MEDICAL TRAVEL INSURANCE

#### 40-Day Supplemental Multi-Trip Annual Plan for PSHCP members

##### \$0 DEDUCTIBLE

This plan is only available if you are a PSHCP member travelling outside of your province or territory of residence for any number of trips of up to 40 consecutive days.

Age of the applicant	0-54	55-59	60-64	65-69	70-74	75-79	80+
Single	\$70	\$88	\$96	\$128	\$191	\$312	\$549
Family	\$140	\$176	\$192	\$256	\$382	\$624	\$1,098

#### Age 59 or Under

##### \$0 DEDUCTIBLE

Plan and Number of days		Age of the applicant					
Medical Multi-Trip Annual	Number of days	0-29		30-54		55-59	
		Single	Family	Single	Family	Single	Family
	4	\$42	\$84	\$52	\$104	\$62	\$124
9	\$67	\$134	\$81	\$162	\$95	\$190	
16	\$93	\$186	\$105	\$210	\$119	\$238	
30	\$155	\$310	\$188	\$376	\$210	\$420	
Medical Single Trip Daily or Top Up	Number of days	0-29		30-54		55-59	
		Single	Family	Single	Family	Single	Family
	1-35	\$3.60	\$7.20	\$4.72	\$9.44	\$5.30	\$10.60
	36-63	\$3.82	\$7.64	\$4.96	\$9.92	\$5.48	\$10.96
	64-84	\$3.88	\$7.76	\$5.06	\$10.12	\$5.57	\$11.14
	85-105	\$4.04	\$8.08	\$5.11	\$10.22	\$5.71	\$11.42
	106-126	\$4.30	\$8.60	\$5.26	\$10.52	\$5.88	\$11.76
	127-154	\$4.68	\$9.36	\$5.51	\$11.02	\$6.26	\$12.52
155-182	\$4.77	\$9.54	\$5.69	\$11.38	\$6.46	\$12.92	
183+	\$5.18	\$10.36	\$6.16	\$12.32	\$6.99	\$13.98	

#### Canada Plan

##### \$0 DEDUCTIBLE

This Single Trip Daily Plan is only available to you if you are travelling outside your province or territory of residence but within Canada for the entire duration of your trip.

Age of the applicant	0-54	55-59	60-64	65-69	70-74	75-79	80-84	85+
Single	\$0.88	\$1.33	\$2.55	\$3.12	\$5.63	\$7.39	\$9.88	\$12.33
Family	\$1.76	\$2.66						

#### 60 to 79 Vacation Plan

##### \$0 DEDUCTIBLE

This Single Trip Daily Plan is only available if you are between ages 60 and 79 and are travelling outside of your province or territory of residence, or Canada for a maximum of 30 consecutive days.

Age of the applicant	60-64	65-69	70-74	75-79
1-30 days	\$9.36	\$10.70	\$16.30	\$27.70

### NON-MEDICAL TRAVEL INSURANCE

For Trip Cancellation benefits to apply to your covered trip, coverage must be in effect within 7 days of the initial deposit for your covered trip or prior to any cancellation penalties being applicable for your covered trip.

#### Non-Medical Multi-Trip Annual Plan

##### \$0 DEDUCTIBLE

Number of days	Age of the applicant					
	0-29		30-54		55-59	
	Single	Family	Single	Family	Single	Family
4	\$89	\$178	\$89	\$178	\$106	\$212
9	\$93	\$186	\$93	\$186	\$112	\$224
16	\$98	\$196	\$98	\$196	\$115	\$230
30	\$105	\$210	\$105	\$210	\$123	\$246

Number of days	Age of the applicant					
	60-64	65-69	70-74	75-79	80-84	85+
	4	\$130	\$138	\$151	\$188	\$299
9	\$136	\$144	\$158	\$198	\$314	\$358
16	\$139	\$147	\$161	\$201	\$319	\$364
30	\$148	\$159	\$173	\$216		

For rates to top up the Non-Medical Multi-Trip Annual Plan, contact your broker or sales agent.

#### Non-Medical Single Trip Plan

##### \$0 DEDUCTIBLE

Rates per \$100 of sum insured for your trip's value (Rounded to the next \$100)  
No family rates are available.

Age of the applicant	0-59	60-79	80+
Rates per \$100 of sum insured	\$7.00	\$8.00	\$10.00

#### Travel Companion Savings

5% Saving

##### Two is better than one!

You and a travel companion will each save 5% on your travel insurance as long as you are travelling together from your point of departure and share the same accommodation and transportation for the duration of your trip.

**Simply subtract 5% from the Travel Companion Savings line in the Premium Calculation.**

**EMERGENCY MEDICAL TRAVEL INSURANCE**

**Important: To determine which plan type you qualify for, please complete the Application Age 60 or over.**

Deductible Options*						
Deductible	\$0	\$250 US	\$500 US	\$1,000 US	\$5,000 US	\$10,000 US
Change in rates	+ 10%	automatic	- 5%	- 10%	- 30%	- 45%

\* Deductible options are available for plans requiring a Medical Questionnaire.

**Note:** If you have smoked or used any tobacco products during the 5 years prior to the application date of your insurance, add 20% to your premium.

Supreme							
Plan and Number of days	Age of the applicant						
	60-64	65-69	70-74	75-79	80-84	85+	
Medical Multi-Trip Annual	4	\$64	\$88	\$104	\$190	\$343	\$455
	9	\$97	\$124	\$147	\$269	\$599	\$720
	16	\$128	\$159	\$208	\$390	\$747	\$945
	30	\$217	\$278	\$361	\$652		
Medical Single Trip Daily or Top Up	1-35	\$5.34	\$7.10	\$8.96	\$14.53	\$21.12	\$26.92
	36-63	\$5.63	\$7.20	\$10.66	\$15.68	\$22.18	\$28.47
	64-84	\$5.97	\$8.17	\$10.75	\$16.52	\$23.37	\$29.38
	85-105	\$6.11	\$8.41	\$10.88	\$17.79	\$23.55	\$29.57
	106-126	\$6.46	\$8.90	\$11.30	\$21.24	\$27.50	\$34.29
	127-154	\$6.84	\$9.83	\$12.55	\$22.04	\$29.00	\$35.47
	155-182	\$7.48	\$10.03	\$12.99	\$22.26	\$31.30	\$39.25
	183+	\$7.71	\$10.49	\$13.34	\$23.46	\$35.75	\$43.91

Elite							
Plan and Number of days	Age of the applicant						
	60-64	65-69	70-74	75-79	80-84	85+	
Medical Multi-Trip Annual	4	\$74	\$104	\$121	\$242	\$390	\$488
	9	\$116	\$136	\$172	\$317	\$646	\$773
	16	\$155	\$206	\$268	\$479	\$855	\$1 071
	30	\$267	\$341	\$441	\$724		
Medical Single Trip Daily or Top Up	1-35	\$6.40	\$7.97	\$10.02	\$19.22	\$30.55	\$37.79
	36-63	\$6.76	\$8.05	\$11.95	\$20.18	\$32.07	\$39.23
	64-84	\$7.18	\$9.14	\$12.35	\$21.26	\$32.91	\$40.48
	85-105	\$7.35	\$9.41	\$12.53	\$22.92	\$34.03	\$41.82
	106-126	\$7.75	\$10.23	\$13.94	\$24.44	\$35.18	\$44.08
	127-154	\$8.38	\$11.02	\$15.06	\$25.35	\$37.51	\$45.61
	155-182	\$9.21	\$11.23	\$15.64	\$25.58	\$40.45	\$50.45
	183+	\$9.72	\$12.62	\$17.14	\$28.33	\$46.19	\$56.46

Advantage							
Plan and Number of days	Age of the applicant						
	60-64	65-69	70-74	75-79	80-84	85+	
Medical Multi-Trip Annual	4	\$100	\$150	\$183	\$319	\$500	\$618
	9	\$208	\$283	\$364	\$670	\$1,101	\$1,438
	16	\$260	\$384	\$486	\$900	\$1,365	\$1,691
	30	\$426	\$631	\$773	\$1,349		
Medical Single Trip Daily or Top Up	1-35	\$10.17	\$14.85	\$17.74	\$32.97	\$48.56	\$61.76
	36-63	\$10.68	\$16.07	\$19.56	\$35.45	\$52.33	\$70.12
	64-84	\$11.92	\$16.30	\$22.02	\$36.60	\$57.84	\$71.82
	85-105	\$12.02	\$18.12	\$24.29	\$37.36	\$60.05	\$75.14
	106-126	\$12.62	\$18.61	\$24.79	\$38.51	\$61.79	\$77.75
	127-154	\$13.02	\$20.73	\$26.68	\$40.55	\$67.70	\$87.48
	155-182	\$13.64	\$22.52	\$28.35	\$41.45	\$70.28	\$91.41
	183+	\$15.59	\$24.19	\$31.18	\$42.75	\$76.33	\$98.59

Standard							
Plan and Number of days	Age of the applicant						
	60-64	65-69	70-74	75-79	80-84	85+	
Medical Multi-Trip Annual	4	\$106	\$152	\$193	\$340	\$528	\$701
	9	\$251	\$357	\$435	\$812	\$1,333	\$1,739
	16	\$311	\$485	\$614	\$1 145	\$1,647	\$2,044
	30	\$520	\$799	\$933	\$1,720		
Medical Single Trip Daily or Top Up	1-35	\$12.55	\$18.11	\$21.82	\$41.71	\$60.13	\$74.69
	36-63	\$13.17	\$19.43	\$24.78	\$42.83	\$69.00	\$84.77
	64-84	\$14.43	\$21.66	\$29.29	\$46.32	\$75.03	\$90.78
	85-105	\$15.17	\$21.95	\$29.37	\$47.29	\$77.84	\$94.84
	106-126	\$15.66	\$22.91	\$30.55	\$47.46	\$79.49	\$98.14
	127-154	\$16.43	\$24.37	\$31.46	\$47.75	\$81.87	\$110.37
	155-182	\$17.26	\$26.53	\$33.42	\$48.82	\$84.95	\$110.52
	183+	\$18.82	\$29.28	\$37.70	\$51.72	\$92.28	\$119.18