

Payment Options

Initial Payment Two (2) months' premium using:

OPTION #1 Pre-Authorized Debit (PAD)

OPTION #2 Credit Card Account

Visa, MasterCard or American Express

Subsequent Payments

OPTION #1 Pre-Authorized Debit (PAD)

- Monthly
- Semi-Annually: 2% discount
- Annually: 4% discount

Important: For verification purposes, we require a sample cheque marked 'VOID'.

OPTION #2 Credit Card Account

Visa, MasterCard or American Express

- Monthly
- Semi-Annually
- Annually

Please note: Billing frequency discounts are not available for credit card payment options.

OPTION #3 Direct Billing

- Semi-Annually: 2% discount
- Annually: 4% discount



Earn *AIR MILES® reward miles

at three stages: request an online quote; become a Flexcare® policyholder; and, on an ongoing basis, every 6 months, for as long as you remain a Manulife Financial policyholder. This offer is available only where permitted by law.

* Subject to terms and conditions.
See www.manulife.ca for details.

For more information:



Monthly Premiums for Residents of British Columbia



Effective May 1, 2014



Flexcare® Health and Dental Plans are offered through
The Manufacturers Life Insurance Company (Manulife Financial).

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FlexCare®

Core Plans								Vision, Travel & AD&D are all Add-Ons								Stand-Alones Without a Core Plan			
Age Group	DrugPlus™ Basic	DrugPlus™ Enhanced	ComboPlus™ Starter	ComboPlus™ Basic	ComboPlus™ Enhanced	DentalPlus™ Basic	DentalPlus™ Enhanced	Vision Enhanced¹	Travel +8 Days	Travel +21 Days	AD&D Enhanced	Hospital Basic	Hospital Enhanced	Catastrophic Coverage (\$4,500 deductible)²	Catastrophic Coverage (\$10,200 deductible)³	Hospital Basic	Hospital Enhanced	Catastrophic Coverage (\$4,500 deductible)	Catastrophic Coverage (\$10,200 deductible)
Single Adults																			
< 45	\$50.40	\$74.80	\$63.10	\$75.20	\$119.00	\$67.10	\$101.50	\$15.80	\$4.30	\$7.20	\$3.20	\$7.20	\$9.50	\$13.10	\$11.90	\$15.50	\$17.70	\$19.30	\$17.50
45-54	\$58.70	\$79.00	\$75.40	\$92.40	\$146.50	\$71.00	\$122.20	\$17.00	\$4.30	\$7.20	\$3.30	\$6.60	\$9.10	\$14.60	\$13.30	\$14.80	\$17.40	\$20.80	\$18.90
55-59	\$66.40	\$87.20	\$79.60	\$96.70	\$156.50	\$71.30	\$124.90	\$17.40	\$5.10	\$8.10	\$3.40	\$7.30	\$10.40	\$16.10	\$14.60	\$15.70	\$18.70	\$22.20	\$20.20
60-64	\$72.70	\$96.60	\$85.00	\$103.80	\$163.90	\$74.40	\$127.40	\$17.50	\$6.80	\$11.60	\$3.40	\$10.50	\$14.40	\$17.60	\$16.00	\$19.00	\$22.70	\$23.50	\$21.40
65-69	\$58.10	\$79.30	\$78.60	\$86.50	\$144.40	\$72.30	\$121.10	\$15.20	n/a	n/a	\$3.10	\$13.90	\$17.80	†	†	\$22.30	\$26.00	†	†
70-79	\$70.20	\$96.60	\$90.70	\$98.30	\$155.60	\$74.40	\$121.30	\$13.30	n/a	n/a	\$3.90	\$20.10	\$26.00	†	†	\$28.60	\$34.60	†	†
80-89	\$83.80	\$122.70	\$102.10	\$103.50	\$169.20	\$77.50	\$119.70	\$11.90	n/a	n/a	\$6.90	\$29.20	\$37.70	†	†	\$37.50	\$46.30	†	†
90+	\$139.80	\$194.30	\$149.70	\$151.60	\$198.30	\$115.10	\$144.40	\$11.40	n/a	n/a	\$10.70	\$38.20	\$49.60	†	†	\$46.50	\$57.70	†	†
Couples (per adult)																			
< 45	\$41.70	\$63.20	\$53.90	\$65.40	\$107.40	\$55.90	\$85.80	\$13.30	\$4.30	\$7.20	\$3.20	\$6.80	\$9.10	\$13.10	\$11.90	\$11.80	\$13.80	\$16.50	\$15.00
45-54	\$49.80	\$67.70	\$65.60	\$81.90	\$133.90	\$59.30	\$104.10	\$13.90	\$4.30	\$7.20	\$3.30	\$6.50	\$8.50	\$14.60	\$13.30	\$11.30	\$13.50	\$18.00	\$16.40
55-59	\$56.70	\$75.50	\$69.10	\$85.40	\$143.00	\$59.70	\$106.60	\$14.40	\$5.10	\$8.10	\$3.40	\$7.10	\$9.90	\$16.10	\$14.60	\$12.00	\$14.90	\$19.30	\$17.50
60-64	\$63.10	\$84.10	\$74.60	\$92.10	\$150.20	\$62.50	\$108.80	\$14.60	\$6.80	\$11.60	\$3.40	\$9.90	\$12.30	\$17.60	\$16.00	\$14.90	\$17.40	\$20.80	\$18.90
65-69	\$48.20	\$66.70	\$67.70	\$75.20	\$131.10	\$60.00	\$102.90	\$12.60	n/a	n/a	\$3.10	\$13.30	\$16.70	†	†	\$18.10	\$21.60	†	†
70-79	\$59.90	\$83.20	\$79.60	\$86.50	\$141.60	\$62.40	\$102.90	\$11.30	n/a	n/a	\$3.90	\$19.20	\$24.20	†	†	\$24.10	\$29.00	†	†
80-89	\$72.80	\$107.60	\$90.40	\$91.30	\$154.00	\$65.00	\$101.30	\$10.30	n/a	n/a	\$6.90	\$27.30	\$35.10	†	†	\$32.30	\$40.20	†	†
90+	\$126.40	\$174.70	\$136.90	\$138.00	\$182.40	\$100.30	\$123.30	\$9.50	n/a	n/a	\$10.70	\$35.30	\$45.90	†	†	\$40.40	\$50.70	†	†
Child (per child, for families with 1 or 2 children)																			
0-4	\$23.60	\$33.50	\$26.50	\$29.10	\$38.30	\$20.70	\$23.20	\$4.30	\$4.20	\$6.70	\$2.90	\$5.50	\$6.60	\$11.70	\$10.60	\$5.50	\$6.60	\$11.00	\$10.00
5-20	\$19.60	\$25.50	\$31.70	\$38.30	\$72.10	\$34.80	\$65.70	\$13.00	\$4.20	\$6.70	\$2.80	\$4.30	\$5.30	\$11.70	\$10.60	\$4.30	\$5.30	\$11.00	\$10.00
Child (per child, for families with 3+ children)																			
0-4	\$21.30	\$30.20	\$24.00	\$26.00	\$34.70	\$18.70	\$20.90	\$4.00	\$3.90	\$6.10	\$2.70	\$4.90	\$5.90	\$11.70	\$10.60	\$4.90	\$5.90	\$11.00	\$10.00
5-20	\$17.60	\$23.20	\$28.60	\$34.70	\$64.90	\$31.30	\$59.50	\$11.80	\$3.90	\$6.10	\$2.50	\$4.00	\$4.50	\$11.70	\$10.60	\$4.00	\$4.50	\$11.00	\$10.00

Rates are effective May 1, 2014, and are subject to change without notice.

¹ Available only as a renewal. Please contact Manulife Financial for rates.

² Vision Add-On is not available with ComboPlus Starter plan. ³ Add-On to DrugPlus Basic plan and ComboPlus Basic plan only. ⁴ Add-On to DrugPlus Enhanced plan and ComboPlus Enhanced plan only.

Premiums for Couples and Children are per each individual. Premiums are based on individual age at the time of application. Premiums will change as an individual's age increases in accordance with published age groups.

Remember, any Core, Add-On or Stand-Alone plan you choose must apply to ALL family members.

 **Guaranteed to Issue Plan
with no underwriting required**

 **Plan requires medical
underwriting**