

Health Insurance Made Easy

EasyInsure Plan Comparator & Rate Sheet



Benefits effective April 1, 2021	No Medical Underwriting Required — Your Acceptance is Guaranteed			
	PLAN 1 HEALTH	PLAN 2 DENTAL/HEALTH	PLAN 3 DENTAL/HEALTH	FUNDAMENTAL PLAN
PRESCRIPTION DRUGS (benefits per person)				
Maximums	Not included	Not included	Not included	Year 1: \$550 Year 2: \$600 Year 3+: \$650 Plan pays 70% to annual max.
DENTAL CARE (benefits per person)				
Maximums	Not included	Year 1: \$500 Year 2: \$650 Year 3+: \$800	Year 1: \$600 Year 2: \$800 Year 3+: \$1,000	\$450 per year
Recall Frequency		9 months	9 months	9 months
Basic Services		Plan pays 80%, subject to annual max.	Plan pays 80%, subject to annual max.	Plan pays 70%, subject to annual max.
Comprehensive Basic Services		Year 1: Plan pays 50% Year 2: Plan pays 70% Year 3+: Plan pays 80% subject to annual max.	Plan pays 80%, subject to annual max.	Plan pays 70%, subject to annual max.
Major Services		Not included	Available in Year 3 - Plan pays 50%, subject to annual max.	Not included
Orthodontic Services		Not included	Not included	Not included
VISION CARE (benefits per person)				
Vision Care Prescription eyeglasses, contact lenses, laser eye surgery	\$150 every 2 years	\$150 every 2 years	\$150 every 2 years	\$150 every 2 years
Eye Examination	\$65 every 2 years	\$65 every 2 years	\$65 every 2 years	\$80 every 2 years
EXTENDED HEALTH CARE (benefits per person)				
Professional Services/Registered Therapists				
Acupuncturist, Chiropractor, Chiropracist/Podiatrist, Massage Therapist, Naturopath, Osteopath, Physiotherapist	\$20 per visit to a max. of \$300 per practitioner, per year	\$20 per visit to a max. of \$300 per practitioner, per year	\$20 per visit to a max. of \$400 per practitioner, per year	\$20 per visit to a max. of \$400 per practitioner, per year
Psychologist/Registered Social Worker, Speech Therapist	\$300 per practitioner, per year	\$300 per practitioner, per year	\$400 per practitioner, per year	\$400 per practitioner, per year
MindBeacon™ Online Mental Health Therapy	Personalized cognitive behavioural therapy delivered digitally (iCBD); one standard therapy course (up to 12 weeks) per year			
Accidental Dental	\$5,000 per year	\$5,000 per year	\$5,000 per year	\$3,000 per year
Ambulance Transportation	Includes land and air	Includes land and air	Includes land and air	Includes land and air
Hearing Aids	Year 1-4: \$300 Year 5+: \$400 every 4 years	Year 1-4: \$300 Year 5+: \$400 every 4 years	Year 1-4: \$350 Year 5+: \$500 every 4 years	Year 1-4: \$350 Year 5+: \$500 every 4 years
Medical Services Diagnostic tests and x-rays, dialysis equipment, laboratory tests	\$2,000 per year	\$2,000 per year	\$2,000 per year	\$2,000 per year
Medical Items and Home Support Services (in home nursing) Separate maximums for Medical Items and Home Support Services	Year 1: \$1,000 Year 2: \$1,500 Year 3: \$2,000 Year 4+: \$2,500 per benefit category, per year	Year 1: \$2,000 Year 2: \$3,000 Year 3: \$4,000 Year 4+: \$5,000 per benefit category, per year	Year 1: \$2,000 Year 2: \$3,000 Year 3: \$4,000 Year 4+: \$5,000 per benefit category, per year	Year 1: \$1,500 Year 2: \$2,000 Year 3: \$3,000 Year 4+: \$4,000 per benefit category, per year
TRAVEL (benefits per person) Out of Province/Country				
Emergency Medical Travel Coverage	15 days per trip; \$5,000,000 per year	15 days per trip; \$5,000,000 per year	15 days per trip; \$5,000,000 per year	15 days per trip; \$5,000,000 per year
OPTIONAL HOSPITAL ACCOMMODATION (benefits per person) Optional benefit pays for the difference in cost between standard ward charges and Semi-Private and/or Private accommodation in a public general hospital. Medical underwriting is required.				
Semi-Private and/or Private	Up to 30 days per year	Up to 30 days per year	Up to 30 days per year	Up to 30 days per year

Benefits effective April 1, 2021	Medical Underwriting Required			
	PLAN 4 DRUG/HEALTH	PLAN 5 DRUG/DENTAL/HEALTH	PLAN 6 DRUG/DENTAL/HEALTH	PLAN 7 DRUG/DENTAL/HEALTH
PRESCRIPTION DRUGS (benefits per person)				
Maximums	Year 1-2: \$2,500 Year 3+: \$3,500 Plan pays 80% to annual max.	\$5,000 Plan pays 90% to annual max.	\$10,000 Plan pays 90% to annual max.	\$20,000 Plan pays 90% to annual max.
DENTAL CARE (benefits per person)				
Maximums	Not included	Year 1: \$700 Year 2: \$900 Year 3+: \$1,100	Year 1: \$800 Year 2: \$1,000 Year 3+: \$1,300	Year 1: \$1,000 Year 2: \$1,200 Year 3+: \$1,500
Recall Frequency		9 months	6 months	6 months
Basic Services		Plan pays 80%, subject to annual max.	Plan pays 80%, subject to annual max.	
Comprehensive Basic Services		Year 1: Plan pays 60% Year 2: Plan pays 70% Year 3+: Plan pays 80% subject to annual max.	Plan pays 80%, subject to annual max.	Year 1: Plan pays 80%, subject to annual max. Year 2+: Plan pays 90%, subject to annual max.
Major Services		Available in Year 3 - Plan pays 50%, subject to annual max.	Available in Year 3 - Plan pays 50%, subject to annual max.	Available in Year 3 - Plan pays 50%, subject to annual max.
Orthodontic Services		Not included	Available in Year 3 - Plan pays 50% subject to Year 3+ annual max. and \$2,000 lifetime max.	Available in Year 3 - Plan pays 50% subject to Year 3+ annual max. and \$2,000 lifetime max.
VISION CARE (benefits per person)				
Vision Care Prescription eyeglasses, contact lenses, laser eye surgery	\$150 every 2 years	Year 1-2: \$150 Year 3-4: \$200 Year 5+: \$250 every 2 years	Year 1-2: \$200 Year 3-4: \$250 Year 5+: \$300 every 2 years	Year 1-2: \$250 Year 3-4: \$300 Year 5+: \$350 every 2 years
Eye Examination	\$80 every 2 years	\$100 every 2 years	\$100 every 2 years	\$120 every 2 years
EXTENDED HEALTH CARE (benefits per person)				
Professional Services/Registered Therapists				
Acupuncturist, Chiropractor, Chiropractor/Podiatrist, Massage Therapist, Naturopath, Osteopath, Physiotherapist	\$20 per visit to a max. of \$400 per practitioner, per year	\$25 per visit to a max. of \$500 per practitioner, per year	\$25 per visit to a max. of \$600 per practitioner, per year	\$50 per visit to a max. of \$750 per practitioner; \$2,000 combined per year
Psychologist/Registered Social Worker, Speech Therapist	\$400 per practitioner, per year	\$500 per practitioner, per year	\$600 per practitioner, per year	\$750 per practitioner, per year
MindBeacon™ Online Mental Health Therapy	Personalized cognitive behavioural therapy delivered digitally (iCBD); one standard therapy course (up to 12 weeks) per year			
Accidental Dental	\$5,000 per year	\$10,000 per year	\$10,000 per year	\$15,000 per year
Ambulance Transportation	Includes land and air	Includes land and air	Includes land and air	Includes land and air
Hearing Aids	Year 1-4: \$350 Year 5+: \$500 every 4 years	\$500 every 4 years	\$500 every 4 years	\$600 every 4 years
Medical Services Diagnostic tests and x-rays, dialysis equipment, laboratory tests	\$2,000 per year	\$2,000 per year	\$2,000 per year	\$2,500 per year
Medical Items and Home Support Services (in home nursing) Separate maximums for Medical Items and Home Support Services	Year 1: \$2,000 Year 2: \$3,000 Year 3: \$4,000 Year 4+: \$5,000 per benefit category, per year	Year 1: \$2,000 Year 2: \$4,000 Year 3+: \$6,000 per benefit category, per year	Year 1: \$2,000 Year 2: \$4,000 Year 3+: \$6,000 per benefit category, per year	Year 1: \$3,000 Year 2: \$5,000 Year 3+: \$8,000 per benefit category, per year
TRAVEL (benefits per person) Out of Province/Country				
Emergency Medical Travel Coverage	15 days per trip; \$5,000,000 per year	30 days per trip; \$5,000,000 per year	30 days per trip; \$5,000,000 per year	30 days per trip; \$5,000,000 per year
OPTIONAL HOSPITAL ACCOMMODATION (benefits per person) Optional benefit pays for the difference in cost between standard ward charges and Semi-Private and/or Private accommodation in a public general hospital. Medical underwriting is required.				
Semi-Private and/or Private	Up to 30 days per year	Up to 30 days per year	Up to 30 days per year	Up to 30 days per year

Monthly Rates
for Residents of:

British Columbia	PLAN 1				PLAN 2			PLAN 3			FUNDAMENTAL PLAN			Optional Hospital Accommodation can be added to any plan		
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family			
	18 - 44	\$27	\$50	\$64	\$79	\$149	\$195	\$86	\$162	\$211	\$88	\$156	\$228			
	45 - 54	\$28	\$52	\$68	\$80	\$153	\$199	\$87	\$164	\$214	\$105	\$187	\$268			
	55 - 59	\$30	\$56	\$70	\$83	\$156	\$203	\$88	\$166	\$217	\$110	\$197	\$285			
	60 - 64	\$31	\$59	\$76	\$85	\$157	\$204	\$89	\$168	\$219	\$116	\$214	\$303			
	65+	\$37	\$73	\$91	\$91	\$171	\$221	\$97	\$183	\$234	\$112	\$203	\$290			
	PLAN 4				PLAN 5			PLAN 6			PLAN 7					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
	18 - 44	\$54	\$101	\$129	\$112	\$213	\$276	\$127	\$239	\$311	\$163	\$310	\$414	\$5	\$8	\$11
45 - 54	\$60	\$111	\$147	\$117	\$223	\$288	\$132	\$251	\$326	\$170	\$328	\$442	\$6	\$13	\$16	
55 - 59	\$66	\$123	\$162	\$125	\$236	\$307	\$141	\$268	\$349	\$182	\$347	\$454	\$7	\$14	\$20	
60 - 64	\$74	\$142	\$184	\$132	\$253	\$326	\$150	\$284	\$371	\$195	\$373	\$487	\$13	\$22	\$28	
65+	\$67	\$129	\$165	\$131	\$250	\$321	\$148	\$280	\$361	\$191	\$368	\$473	\$19	\$32	\$39	

Alberta	PLAN 1				PLAN 2			PLAN 3			FUNDAMENTAL PLAN			Optional Hospital Accommodation can be added to any plan		
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family			
	18 - 44	\$31	\$57	\$73	\$77	\$142	\$184	\$88	\$165	\$214	\$98	\$168	\$247			
	45 - 54	\$33	\$60	\$76	\$79	\$145	\$189	\$90	\$169	\$219	\$113	\$206	\$293			
	55 - 59	\$34	\$63	\$79	\$80	\$149	\$193	\$91	\$171	\$222	\$119	\$216	\$309			
	60 - 64	\$35	\$66	\$82	\$81	\$152	\$196	\$92	\$174	\$226	\$125	\$228	\$324			
	65+	\$43	\$78	\$100	\$88	\$167	\$212	\$99	\$189	\$241	\$115	\$206	\$284			
	PLAN 4				PLAN 5			PLAN 6			PLAN 7					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
	18 - 44	\$59	\$108	\$142	\$118	\$224	\$289	\$136	\$259	\$337	\$174	\$335	\$449	\$6	\$11	\$13
45 - 54	\$65	\$121	\$156	\$125	\$236	\$307	\$144	\$272	\$355	\$184	\$356	\$481	\$7	\$15	\$19	
55 - 59	\$74	\$139	\$179	\$133	\$254	\$328	\$155	\$292	\$382	\$201	\$378	\$497	\$10	\$19	\$23	
60 - 64	\$83	\$156	\$203	\$143	\$270	\$353	\$164	\$312	\$408	\$213	\$409	\$535	\$16	\$27	\$36	
65+	\$75	\$141	\$182	\$136	\$266	\$341	\$159	\$305	\$393	\$207	\$403	\$516	\$21	\$38	\$48	

Saskatchewan, Manitoba, Northwest Territories, Yukon and Nunavut	PLAN 1				PLAN 2			PLAN 3			FUNDAMENTAL PLAN			Optional Hospital Accommodation can be added to any plan		
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family			
	18 - 44	\$26	\$49	\$61	\$59	\$108	\$140	\$66	\$125	\$162	\$89	\$147	\$234			
	45 - 54	\$27	\$50	\$63	\$60	\$111	\$142	\$67	\$128	\$165	\$99	\$179	\$254			
	55 - 59	\$28	\$53	\$67	\$61	\$112	\$148	\$69	\$130	\$169	\$104	\$187	\$270			
	60 - 64	\$29	\$56	\$69	\$62	\$114	\$150	\$70	\$132	\$171	\$113	\$200	\$284			
	65+	\$34	\$66	\$83	\$68	\$129	\$166	\$76	\$148	\$186	\$125	\$219	\$302			
	PLAN 4				PLAN 5			PLAN 6			PLAN 7					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
	18 - 44	\$54	\$102	\$131	\$95	\$180	\$233	\$109	\$209	\$271	\$140	\$270	\$361	\$5	\$8	\$11
45 - 54	\$60	\$113	\$148	\$100	\$191	\$248	\$115	\$221	\$289	\$148	\$289	\$392	\$6	\$13	\$16	
55 - 59	\$67	\$128	\$164	\$107	\$207	\$266	\$125	\$239	\$310	\$162	\$310	\$403	\$7	\$14	\$19	
60 - 64	\$78	\$144	\$190	\$115	\$223	\$289	\$133	\$256	\$334	\$173	\$335	\$439	\$13	\$22	\$28	
65+	\$71	\$135	\$174	\$113	\$218	\$279	\$130	\$246	\$320	\$170	\$325	\$420	\$18	\$31	\$39	

Monthly Rates
for Residents of:

		PLAN 1			PLAN 2			PLAN 3			FUNDAMENTAL PLAN					
Ontario	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Optional Hospital Accommodation can be added to any plan		
	18 - 44	\$32	\$61	\$78	\$78	\$147	\$191	\$89	\$169	\$219	\$105	\$187	\$267			
	45 - 54	\$34	\$64	\$81	\$79	\$151	\$195	\$91	\$172	\$223	\$124	\$227	\$322			
	55 - 59	\$35	\$67	\$85	\$82	\$154	\$200	\$92	\$175	\$228	\$137	\$242	\$348			
	60 - 64	\$37	\$69	\$88	\$83	\$156	\$203	\$94	\$178	\$232	\$140	\$253	\$359			
	65+	\$43	\$82	\$103	\$90	\$173	\$219	\$102	\$193	\$247	\$123	\$223	\$320			
	PLAN 4				PLAN 5			PLAN 6			PLAN 7					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
	18 - 44	\$67	\$129	\$166	\$127	\$238	\$311	\$144	\$273	\$356	\$184	\$354	\$473	\$6	\$12	\$17
	45 - 54	\$75	\$143	\$185	\$133	\$253	\$329	\$153	\$288	\$376	\$197	\$377	\$510	\$9	\$17	\$23
	55 - 59	\$86	\$164	\$212	\$144	\$272	\$355	\$163	\$312	\$408	\$211	\$404	\$530	\$12	\$21	\$26
60 - 64	\$97	\$184	\$243	\$154	\$293	\$383	\$176	\$334	\$436	\$229	\$438	\$573	\$18	\$31	\$41	
65+	\$88	\$167	\$214	\$147	\$282	\$362	\$168	\$319	\$413	\$219	\$421	\$541	\$24	\$43	\$56	
New Brunswick, Nova Scotia, Prince Edward Island, Newfoundland and Labrador	PLAN 1				PLAN 2			PLAN 3			FUNDAMENTAL PLAN					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Optional Hospital Accommodation can be added to any plan		
	18 - 44	\$31	\$58	\$75	\$65	\$122	\$159	\$72	\$136	\$177	\$91	\$156	\$257			
	45 - 54	\$33	\$62	\$78	\$67	\$124	\$162	\$73	\$139	\$179	\$108	\$198	\$279			
	55 - 59	\$34	\$66	\$84	\$68	\$127	\$166	\$75	\$144	\$185	\$116	\$216	\$304			
	60 - 64	\$38	\$70	\$89	\$70	\$130	\$169	\$77	\$145	\$189	\$126	\$232	\$328			
	65+	\$43	\$82	\$104	\$76	\$146	\$187	\$84	\$161	\$207	\$119	\$205	\$305			
	PLAN 4				PLAN 5			PLAN 6			PLAN 7					
	AGE	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
	18 - 44	\$67	\$126	\$165	\$108	\$208	\$271	\$127	\$239	\$311	\$163	\$310	\$414	\$6	\$12	\$15
	45 - 54	\$73	\$142	\$182	\$115	\$221	\$287	\$135	\$256	\$332	\$173	\$334	\$451	\$8	\$15	\$19
55 - 59	\$86	\$161	\$210	\$127	\$241	\$313	\$146	\$276	\$361	\$189	\$358	\$469	\$12	\$18	\$23	
60 - 64	\$96	\$182	\$238	\$138	\$261	\$342	\$158	\$301	\$393	\$206	\$394	\$517	\$15	\$26	\$36	
65+	\$85	\$165	\$211	\$133	\$250	\$321	\$150	\$287	\$370	\$196	\$379	\$485	\$21	\$38	\$48	

Benefit Descriptions

PRESCRIPTION DRUGS

Prescription drug benefits cover prescription drugs approved for use in Canada that require a prescription by law and have been prescribed by an authorized medical practitioner.

Brand name drugs are covered if no generic equivalent exists.

Smoking cessation products and drugs for the treatment of obesity, infertility and erectile dysfunction are not covered.

DENTAL CARE

BASIC SERVICES

- Preventive cleaning
- Routine examinations, x-rays
- Fillings and extractions
- Fluoride treatment for children

COMPREHENSIVE BASIC SERVICES

- Endodontic treatment - root canal therapy
- Periodontal treatment - scaling and root planing, occlusal adjustment and equilibration
- Denture repairs, rebasing and relining

MAJOR SERVICES

- Crowns and onlays, dentures, bridgework

ORTHODONTIC SERVICES

- Orthodontic treatment to straighten teeth and correct the bite

EXTENDED HEALTH

MEDICAL ITEMS

- Aids for daily living (such as hospital style beds, IV stand, trapeze, bedpan)
- Braces, casts, catheters and ostomy supplies
- Compression stockings
- Diabetic supplies
- Custom made boots or shoes, custom made foot orthotics
- Mobility aids (such as canes, crutches, walkers, wheelchairs)
- Prosthetics
- Respiratory/Cardiology items (such as breathing and heart monitors for infants, compressors, oxygen)

EMERGENCY MEDICAL TRAVEL COVERAGE

Multi-trip emergency medical coverage when travelling out-of-province or out-of-country

OPTIONAL HOSPITAL ACCOMMODATION

Semi-private and/or private accommodation in a public general hospital in your province/territory of residence

