MEDICARE INTERNATIONAL TRAVEL INSURANCE RATES

Version M06 - Effective February 2009

SINGLE TRIP EMERGENCY MEDICAL
(Premium Rates per Day with $0 Deductible)

RATE CATEGORY A - NO UNDERWRITING
NO MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	0-25	26-39	40-54	
1 to 17	$1.78	$1.97	$2.22	Over age 54, see below
18 to 30	$1.78	$1.97	$2.22	
31 to 60	$1.82	$2.01	$2.26	
61 to 90	$1.90	$2.10	$2.35	
91 to 120	$1.97	$2.18	$2.45	
121 to 150	$2.03	$2.22	$2.52	
151 to 212	$2.07	$2.27	$2.56	
213 to 365	Call for a quotation			

Any Pre-existing Condition must be **STABLE** in the **3** months prior to the effective date to be covered with **RATE CATEGORY A**

RATE CATEGORY A+
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
1 to 17	$2.02	$2.43	$2.87	$3.93	$6.32	$12.43	$15.97
18 to 30	$2.08	$2.50	$2.96	$4.05	$6.52	$12.81	$16.46
31 to 60	$2.12	$2.55	$3.05	$4.85	$7.52	$13.74	$18.54
61 to 90	$2.20	$2.66	$3.17	$4.94	$8.94	$14.35	$19.35
91 to 120	$2.25	$2.78	$3.50	$5.07	$9.65	$14.96	$20.19
121 to 150	$2.30	$2.84	$3.58	$5.27	$10.01	$15.33	$20.68
151 to 212	$2.34	$2.90	$4.25	$5.60	$11.04	$15.62	$21.08
213 to 365	Call for a quotation						

Any Pre-existing Condition must be **STABLE** in the **3** months prior to the effective date to be covered with **RATE CATEGORY A+**

RATE CATEGORY A
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
1 to 17	$2.30	$3.09	$3.62	$4.37	$7.03	$15.61	$18.04
18 to 30	$2.37	$3.19	$3.73	$4.50	$7.25	$16.09	$18.60
31 to 60	$2.43	$3.24	$4.21	$5.93	$9.19	$17.28	$20.97
61 to 90	$2.47	$3.34	$4.39	$6.04	$10.95	$18.03	$21.90
91 to 120	$2.56	$3.49	$4.85	$6.20	$12.72	$18.82	$22.84
121 to 150	$2.62	$3.57	$4.96	$6.46	$13.01	$19.28	$23.39
151 to 212	$2.67	$3.65	$5.89	$6.85	$13.27	$19.64	$23.86
213 to 365	Call for a quotation						

Any Pre-existing Condition must be **STABLE** in the **3** months prior to the effective date to be covered with **RATE CATEGORY A**.

RATE CATEGORY B
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
1 to 17	$3.17	$4.21	$5.29	$6.23	$11.45	$19.56	$23.21
18 to 30	$3.27	$4.34	$5.45	$6.42	$11.80	$20.16	$23.93
31 to 60	$3.33	$4.76	$5.86	$6.89	$12.67	$21.63	$26.99
61 to 90	$3.43	$5.12	$6.09	$7.17	$13.23	$22.57	$28.14
91 to 120	$3.58	$5.35	$6.38	$7.49	$13.99	$23.55	$29.37
121 to 150	$3.66	$5.47	$6.52	$7.68	$14.41	$24.11	$31.51
151 to 212	$3.75	$5.58	$6.65	$8.60	$15.83	$24.60	$33.61
213 to 365	Call for a quotation						

Any Pre-existing Condition must be **STABLE** in the **6** months prior to the effective date to be covered with **RATE CATEGORY B**.

RATE CATEGORY C
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
1 to 17	$3.37	$6.18	$8.78	$11.03	$18.06	$30.24	$44.10
18 to 30	$3.47	$6.37	$9.05	$11.38	$18.62	$31.18	$45.46
31 to 60	$3.71	$6.82	$9.70	$12.21	$19.98	$33.47	$51.28
61 to 90	$3.88	$7.12	$10.11	$12.72	$20.86	$34.92	$53.49
91 to 120	$4.05	$7.43	$10.57	$13.26	$21.77	$36.46	$55.85
121 to 150	$4.14	$7.60	$10.82	$13.62	$22.31	$37.33	$57.18
151 to 212	$4.22	$7.76	$12.13	$15.14	$22.75	$41.89	$58.32
213 to 365	Call for a quotation						

Any Pre-existing Condition must be **STABLE** in the **12** months prior to the effective date to be covered with **RATE CATEGORY C**.

FAST TRAK RATE CATEGORY
NO MEDICAL UNDERWRITING REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
1 to 17	$3.69	$6.32	$7.94	$9.35	N/A	N/A	N/A
18 to 30	$3.80	$6.51	$8.73	$10.75	N/A	N/A	N/A

Pre-existing Conditions are **NOT** covered (whether stable or unstable in the **3** months prior to the effective date) with the **FAST TRAK RATE CATEGORY**.

MULTI-TRIP EMERGENCY MEDICAL
(Annual Premiums with $0 Deductible)

RATE CATEGORY A - NO UNDERWRITING
NO MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	0-25	26-39	40-54	
4	$26	$30	$35	Over age 54, see below
10	$36	$41	$46	
18	$63	$65	$71	
30	$83	$96	$103	

RATE CATEGORY A+
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
4	$36	$46	$53	$69	$71	$119	$153
10	$50	$64	$73	$93	$97	$162	$208
18	$62	$76	$84	$108	$123	$202	$260
30	$93	$104	$118	$154	$216	$359	$461

RATE CATEGORY A
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
4	$41	$51	$59	$77	$79	$131	$151
10	$56	$71	$81	$104	$108	$180	$208
18	$76	$88	$97	$127	$175	$291	$336
30	$115	$122	$140	$182	$256	$518	$599

RATE CATEGORY B
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
4	$61	$77	$88	$115	$133	$176	$209
10	$84	$107	$122	$155	$185	$240	$285
18	$94	$117	$129	$163	$236	$443	$526
30	$129	$171	$193	$247	$366	$696	$826

RATE CATEGORY C
FULL MEDICAL QUESTIONNAIRE REQUIRED

Days/Age	55-59	60-64	65-69	70-74	75-79	80-84	85+
4	$73	$92	$105	$138	$257	$317	$462
10	$100	$128	$146	$186	$351	$432	$630
18	$135	$179	$252	$308	$504	$796	$1,161
30	$215	$265	$377	$467	$779	$1,248	$1,820

FAST TRAK RATE CATEGORY

Multi-Trip Not Available

Check the policy for details on the Pre-existing exclusion that applies to each Rate Category.

MEDICARE INTERNATIONAL TRAVEL INSURANCE
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Agent's Instructions

Please read the Application, the Policy Wording and these instructions carefully.

1. Ensure the Medical Questionnaire is completed as required:
   If applicant is:

Age	and travelling	Medical Questionnaire is…	Applicable Rate Category
0-54	All Single-trip durations All Multi-trip Plans	NOT Required	Rate Category A
Age 55+	All Single-trip durations All Multi-trip Plans	Full Questionnaire (or consider Fast Trak if travelling 30 days or less and under age 75)	As per applicant's responses
Age 55 to 74 Fast Trak	Single Trip duration of 1 to 30 Days	NOT Required	Fast Trak Rate Category (pre-existing conditions not covered)

2. The maximum number of days for which you may issue a Single Trip Plan is 183 days (212 for Ontario or Newfoundland resident). Contact 21st Century directly for longer durations. EXCEPTION: The Fast Trak Rate Category can be issued for a maximum of 30 days and cannot be used to top-up any Multi-Trip plan.

3. Each applicant's provincial Government Health Insurance Plan must be valid for the full duration of any policy term.

4. The Multi-trip Plan and Single Trip coverage cannot be combined on one application. Please submit one application for each option.

5. For "Family" rates, all applicants must reside at the same address and be under age 55. Dependents under age 21(under 26 if full-time student) can be included at no additional premium. Calculate "Family" premium by charging 2X the oldest family member's premium.

6. For "Companion Discount", all applicants must be insured under the same policy.

7. If opting for a deductible, apply the following discounts: $500 = 15%, $1,000 = 20%, $5,000 = 35%, $10,000 = 50%.

8. The maximum policy discount permitted is 50%.

9. No more than 2 applicants requiring a medical questionnaire are permitted on one application.

10. When determining age for premium purposes, use the applicant's age on application date.

11. Multiple applicants may be insured under the same policy, however their effective date and expiry date must be identical

12. For Single Trip Plans, the effective date and expiry date each count as one day. If the premium submitted is insufficient for the period of coverage selected, we will a) charge and collect any underpayment; or b) modify the policy term in accordance with the premium received.

13. Coverage will be null and void if the premium is not received or if payment is not honoured or is invalid.

14. We reserve the right to decline any application.

15. The minimum policy premium is $20.00. Changes and/or cancellation of a policy are subject to a $25.00 administration fee. Refund requests must be submitted in writing and a refund will only be considered if there has been no claim. Minimum refund of premium is $25.00.

16. For Policy Issure, contact Ray Battiston, Insurance Broker 1 800 526 7420, fax 705 752 5198 e mail raybattiston@on.aibn.com

The Medicare International Travel Insurance plan is adminstered by 21st Century Travel Insurance Limited.
The policy is underwritten by The Manufacturers Life Insurance Company (Manulife Financial).