



## Flexcare® Health & Dental Plan

### Flexible, affordable and *tailored to you*

At Manulife, we believe that everyone should have access to affordable health and dental insurance — including individuals who don't have a group benefits plan, stay-at-home parents and people who are self-employed. That's why we created Flexcare.

Flexcare Health and Dental Insurance puts you in control of your coverage. It's as easy as choosing the dental and drug plan that meets your needs and budget.

#### Here's how Flexcare has you covered.

##### 1 Select Your Core Plan.

- ComboPlus™: Dental + Drug coverage
- DentalPlus™: Dental coverage
- DrugPlus™: Drug coverage

##### 2 Select Your Coverage Level.

- Starter: Lower coverage amounts and rates (great for add-ons)
- Basic: Well-rounded coverage at affordable rates
- Enhanced: Maximum coverage

<sup>∞</sup> For primary applicant and new clients only. Manulife *Vitality* is not available to clients who have an existing Health & Dental Insurance plan with Manulife.

<sup>†</sup> Only available with the DrugPlus™ and ComboPlus™ Plans (not available to residents of Quebec and persons age 65 and over).

<sup>‡</sup> Travel coverage ceases at age 70.

<sup>\*</sup> Not available with the ComboPlus™ Starter plan.

##### 3 Consider adding Manulife *Vitality*.<sup>∞</sup>

- Help improve your health and get rewarded for it
- The more engaged you are and the healthier your choices, the more money you can save
- Select Manulife *Vitality* with your plan to automatically save 5% on your first-year premiums AND up to 10% in following years.

##### 4 Select Your Add-Ons. Increase your coverage in your Core Plan.

- Accidental Death and Dismemberment Enhanced
- Catastrophic Coverage<sup>‡</sup>
- Hospital (Basic or Enhanced)
- Travel (for longer trips)<sup>‡</sup>
- Vision Enhanced<sup>\*</sup>

For more information, contact your advisor.

#### Plans underwritten by The Manufacturers Life Insurance Company (Manulife).

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To speak with a Manulife representative, contact 1-888-626-8543.

Accessible formats and communication supports are available upon request. Visit [manulife.ca/accessibility](https://manulife.ca/accessibility) for more information.

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## Core Plans

Single Adults

Age		DrugPlus <sup>™</sup> Basic**	DrugPlus <sup>™</sup> Enhanced**	ComboPlus <sup>™</sup> Starter*	ComboPlus <sup>™</sup> Basic**	ComboPlus <sup>™</sup> Enhanced**	DentalPlus <sup>™</sup> Basic*	DentalPlus <sup>™</sup> Enhanced*
<45	Under 65	\$72.00	\$104.30	\$89.70	\$102.50	\$157.70	\$91.90	\$139.80
	65 Plus	\$59.10	\$81.60	\$75.00	\$82.40	\$122.00	\$82.50	\$118.80
45-54	Under 65	\$81.80	\$107.70	\$105.50	\$124.80	\$189.60	\$96.60	\$166.90
	65 Plus	\$63.90	\$82.20	\$85.70	\$97.00	\$145.70	\$86.00	\$141.20
55-59	Under 65	\$93.10	\$119.30	\$111.80	\$130.40	\$202.40	\$97.40	\$170.50
	65 Plus	\$70.10	\$87.60	\$89.10	\$99.20	\$152.50	\$88.30	\$145.20
60-64	Under 65	\$101.20	\$131.00	\$117.90	\$139.70	\$211.20	\$101.10	\$173.10
	65 Plus	\$75.90	\$96.30	\$94.20	\$105.10	\$158.10	\$91.50	\$146.60
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$73.30	\$94.70	\$104.30	\$105.50	\$152.70	\$89.10	\$139.40
70-79	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$90.10	\$112.80	\$123.10	\$121.60	\$163.20	\$91.10	\$136.90
80-89	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$107.60	\$139.50	\$140.80	\$133.00	\$175.80	\$94.30	\$134.00
90+	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$159.20	\$198.90	\$187.80	\$177.30	\$196.20	\$129.60	\$151.90

## Core Plans

Couples (per adult)

Age		DrugPlus <sup>™</sup> Basic**	DrugPlus <sup>™</sup> Enhanced**	ComboPlus <sup>™</sup> Starter*	ComboPlus <sup>™</sup> Basic**	ComboPlus <sup>™</sup> Enhanced**	DentalPlus <sup>™</sup> Basic*	DentalPlus <sup>™</sup> Enhanced*
<45	Under 65	\$59.50	\$88.40	\$76.60	\$88.90	\$142.80	\$75.70	\$117.60
	65 Plus	\$46.70	\$67.10	\$62.30	\$70.10	\$107.80	\$67.10	\$99.10
45-54	Under 65	\$69.50	\$92.30	\$91.20	\$109.80	\$172.90	\$79.60	\$141.50
	65 Plus	\$52.30	\$68.50	\$72.10	\$83.70	\$131.10	\$70.10	\$118.30
55-59	Under 65	\$80.00	\$103.50	\$97.30	\$115.40	\$185.00	\$81.30	\$145.50
	65 Plus	\$57.60	\$73.70	\$75.40	\$85.30	\$137.10	\$72.70	\$122.10
60-64	Under 65	\$87.90	\$114.30	\$103.00	\$124.10	\$194.10	\$84.60	\$147.20
	65 Plus	\$63.40	\$81.90	\$80.30	\$91.30	\$143.10	\$75.40	\$123.80
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$60.70	\$78.70	\$89.10	\$91.30	\$137.70	\$72.50	\$116.80
70-79	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$76.80	\$97.10	\$107.30	\$106.60	\$147.20	\$74.20	\$114.30
80-89	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$93.80	\$122.20	\$124.20	\$117.80	\$160.10	\$77.70	\$111.70
90+	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$143.60	\$177.70	\$170.20	\$160.00	\$179.50	\$110.30	\$128.20

## Core Plans

Child (per child, for families with 1 or 2 children)

Age		DrugPlus <sup>™</sup> Basic**	DrugPlus <sup>™</sup> Enhanced**	ComboPlus <sup>™</sup> Starter*	ComboPlus <sup>™</sup> Basic**	ComboPlus <sup>™</sup> Enhanced**	DentalPlus <sup>™</sup> Basic*	DentalPlus <sup>™</sup> Enhanced*
0-4	Under 65	\$31.90	\$44.00	\$37.20	\$38.90	\$47.00	\$27.00	\$28.60
	65 Plus	\$20.90	\$27.90	\$27.90	\$27.00	\$29.00	\$23.70	\$22.70
5-20	Under 65	\$26.10	\$33.30	\$44.80	\$51.20	\$90.50	\$45.40	\$86.20
	65 Plus	\$20.40	\$24.70	\$36.10	\$39.80	\$76.20	\$39.30	\$72.50

## Core Plans

Child (per child, for families with 3+ children)

Age		DrugPlus <sup>™</sup> Basic**	DrugPlus <sup>™</sup> Enhanced**	ComboPlus <sup>™</sup> Starter*	ComboPlus <sup>™</sup> Basic**	ComboPlus <sup>™</sup> Enhanced**	DentalPlus <sup>™</sup> Basic*	DentalPlus <sup>™</sup> Enhanced*
0-4	Under 65	\$28.70	\$39.90	\$33.60	\$35.10	\$42.20	\$23.90	\$25.60
	65 Plus	\$19.50	\$25.30	\$25.20	\$24.10	\$25.80	\$21.40	\$20.40
5-20	Under 65	\$23.60	\$30.10	\$40.00	\$45.60	\$81.70	\$40.90	\$77.70
	65 Plus	\$18.00	\$22.10	\$32.00	\$35.80	\$69.10	\$35.60	\$65.80

## Vision, Travel &amp; AD&amp;D are all Add-Ons

Single Adults

Age		Vision Enhanced**	Travel +8 Days*	Travel +21 Days*	AD&D Enhanced*	Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2,4</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2,4</sup> (\$10,200 threshold)**
<45	Under 65	\$20.60	\$5.90	\$8.70	\$4.00	\$5.00	\$7.70	\$15.70	\$14.30
	65 Plus	\$21.40	\$5.90	\$8.70	\$4.10	\$5.00	\$8.40	\$17.40	\$15.80
45-54	Under 65	\$21.90	\$6.50	\$10.10	\$4.20	\$5.90	\$9.20	\$19.30	\$17.50
	65 Plus	\$22.20	\$8.40	\$14.30	\$4.20	\$7.30	\$11.40	\$21.20	\$19.30
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$19.10	\$10.60	\$17.10	\$3.90	\$11.40	\$16.50	\$29.00	\$26.40
70-79	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$16.90	N/A	N/A	\$4.70	\$15.40	\$21.50	\$31.90	\$29.00
80-89	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$15.20	N/A	N/A	\$8.30	\$19.90	\$30.40	\$37.10	\$33.70
90+	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$14.60	N/A	N/A	\$12.50	\$26.10	\$38.80	\$45.30	\$41.20

## Vision, Travel &amp; AD&amp;D are all Add-Ons

Couples (per adult)

Age		Vision Enhanced**	Travel +8 Days*	Travel +21 Days*	AD&D Enhanced*	Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2,4</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2,4</sup> (\$10,200 threshold)**
<45	Under 65	\$16.90	\$5.90	\$8.70	\$4.00	\$4.90	\$7.50	\$15.70	\$14.30
	65 Plus	\$18.00	\$5.90	\$8.70	\$4.10	\$5.00	\$7.90	\$17.40	\$15.80
45-54	Under 65	\$18.40	\$6.50	\$10.10	\$4.20	\$5.30	\$8.90	\$19.30	\$17.50
	65 Plus	\$18.50	\$8.40	\$14.30	\$4.20	\$6.90	\$9.20	\$21.20	\$19.30
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$16.00	\$10.60	\$17.10	\$3.90	\$11.00	\$16.00	\$25.80	\$23.50
70-79	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$14.50	N/A	N/A	\$4.70	\$14.30	\$20.30	\$29.00	\$26.40
80-89	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$13.40	N/A	N/A	\$8.30	\$18.90	\$29.00	\$33.90	\$30.80
90+	Under 65	N/A <sup>1</sup>	N/A	N/A	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$11.90	N/A	N/A	\$12.50	\$25.30	\$37.10	\$37.10	\$33.70

## Vision, Travel &amp; AD&amp;D are all Add-Ons

Child (per child, for families with 1 or 2 children)

Age		Vision Enhanced**	Travel +8 Days*	Travel +21 Days*	AD&D Enhanced*	Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2,4</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2,4</sup> (\$10,200 threshold)**
0-4	Under 65	\$6.00	\$5.10	\$8.10	\$3.70	\$4.70	\$5.10	\$14.10	\$12.80
	65 Plus	\$16.90	\$5.10	\$8.10	\$3.60	\$4.40	\$4.80	\$14.10	\$12.80

## Vision, Travel &amp; AD&amp;D are all Add-Ons

Child (per child, for families with 3+ children)

Age		Vision Enhanced**	Travel +8 Days*	Travel +21 Days*	AD&D Enhanced*	Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2,4</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2,4</sup> (\$10,200 threshold)**
0-4	Under 65	\$4.90	\$4.80	\$7.50	\$3.50	\$4.30	\$4.90	\$14.10	\$12.80
	65 Plus	\$15.20	\$4.80	\$7.50	\$3.30	\$4.00	\$4.40	\$14.10	\$12.80

\*Guaranteed to Issue Plan with no underwriting required when applying for coverage

\*\*Plan requires medical underwriting

## Stand-Alones (Without a Core Plan)

Single Adults

Age		Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2</sup> (\$10,200 threshold)**
<45	Under 65	\$15.90	\$18.10	\$23.00	\$20.90
	65 Plus	\$15.90	\$18.80	\$24.90	\$22.60
45-54	Under 65	\$16.30	\$19.80	\$26.50	\$24.10
	65 Plus	\$17.60	\$21.70	\$28.10	\$25.50
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$19.30	\$23.20	\$27.30	\$24.80
70-79	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$22.60	\$28.50	\$30.40	\$27.60
80-89	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$27.10	\$35.90	\$35.10	\$31.90
90+	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$31.50	\$42.80	\$42.50	\$38.60

## Stand-Alones (Without a Core Plan)

Couples (per adult)

Age		Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2</sup> (\$10,200 threshold)**
<45	Under 65	\$11.40	\$13.80	\$19.70	\$17.90
	65 Plus	\$11.60	\$14.20	\$21.60	\$19.60
45-54	Under 65	\$12.00	\$15.50	\$23.00	\$20.90
	65 Plus	\$12.60	\$15.60	\$24.90	\$22.60
65-69	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$17.00	\$22.20	\$24.50	\$22.30
70-79	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$20.80	\$26.20	\$27.30	\$24.80
80-89	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$25.30	\$34.90	\$31.80	\$28.90
90+	Under 65	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>	N/A <sup>1</sup>
	65 Plus	\$31.40	\$43.40	\$35.10	\$31.90

## Stand-Alones (Without a Core Plan)

Child (per child, for families with 1 or 2 children)

Age		Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2</sup> (\$10,200 threshold)**
0-4	Under 65	\$4.70	\$5.10	\$13.10	\$11.90
	65 Plus	\$4.40	\$4.80	\$13.10	\$11.90

## Stand-Alones (Without a Core Plan)

Child (per child, for families with 3+ children)

Age		Hospital Basic**	Hospital Enhanced**	Catastrophic Coverage <sup>2</sup> (\$4,500 threshold)**	Catastrophic Coverage <sup>2</sup> (\$10,200 threshold)**
0-4	Under 65	\$4.30	\$4.90	\$13.10	\$11.90
	65 Plus	\$4.00	\$4.40	\$13.10	\$11.90

Rates are effective May 1, 2022, and are subject to change without notice.

<sup>1</sup> If any person within the family is age 65 or over, all family members should use premiums for residents 65 plus.<sup>2</sup> Vision Add-On is not available with ComboPlus Starter plan.<sup>3</sup> Add-On to DrugPlus Basic plan and ComboPlus Basic plan only.