






HEALTH INSURANCE


| | | FULL Plan | BASIC Plan |
|--|---|---|--|
|  <p>A - PRESCRIPTION DRUGS</p> <p>NOT COVERED if the main insured is 65 years of age and over</p> | Deductible per calendar year | \$250 - combined for cost categories A, B and C | \$100 for cost categorie A |
| | Deductible per DIN | None | None |
| | Drug definition | Require a prescription | Require a prescription |
| | Preventive vaccines | Covered | Covered |
| | Payment card | Direct | Direct |
| | Reimbursement | 80% ¹ | 70% ¹ |
|  <p>B - PARAMEDICAL SERVICES</p> | Deductible | \$250 - combined for cost categories A, B and C | n/a |
| | Reimbursement | 80% | |
| | Reimbursement based on | Payable maximum | |
| | Maximum for each practitioner: | \$40 / treatment, max \$800 / year for all practitioners | |
| | • Audiologist | | |
| | • Naturopath | | |
| | • Chiropractor | | |
| | • Podiatrist | | |
| • Osteopath | | | |
| • Speech therapist | | | |
| • Acupuncturist | \$75 / treatment, \$1,000 / year | | |
| • Massage therapist | \$75 / treatment, \$1,000 / year | | |
| • Homeopath | | | |
| • Psychologist | | | |
| • Physiotherapist | | | |
|  <p>C - OTHERS SERVICES & EXPENSES</p> | Deductible | \$250 - combined for cost categories A, B and C | n/a |
| | Reimbursement | 80% | |
| | Reimbursement based on | Payable maximum | |
| | Maximums: | | n/a |
| | • Orthopaedic shoes | \$400 / year | |
| | • Hearing aids | \$300 / 5 years | |
| | • Nursing care | \$5,000 / 3 years | |
| | • Laboratory tests and X-ray examinations | \$1,000 / year | |
| • Cat scans and MRI's | \$500 / year | | |
|  <p>D - HOSPITAL FEES</p> | Reimbursement | 100% | n/a |
| | Deductible | None | |
| | Room | One bed, max. 60 days / stay | |
| | Convalescence home | \$10 / day, max. 120 days | |
|  <p>E - TRAVEL</p> | Deductible | None | None |
| | Reimbursement | 100% | 100% |
| | Maximal traveling period | First 90 days | First 90 days |
| | Maximum | \$1,000,000 / trip Lifetime maximum : \$2,000,000 | \$1,000,000 / trip Lifetime maximum : \$2,000,000 |
| | Traveling assistance | Yes | Yes |
| | Cancellation insurance | \$5,000 / insured / trip | \$5,000 / insured / trip |
| | Baggage Loss insurance | Up to \$1,000 / insured / trip | Up to \$1,000 / insured / trip |

¹ Subject to the maximum adult RAMQ contribution



DENTAL CARE INSURANCE

Health Insurance coverage must be in force in order to be eligible for Dental Care Insurance.

| | | FULL Plan | BASIC Plan |
|---|------------------------------|---|---|
|  DENTAL CARE | Deductible per calendar year | None | None |
| | Preventive & Basic Care | 80% of eligible expenses | 80% of eligible expenses |
| | Minor restoration | 80% of eligible expenses | n/a |
| | Major restoration | 50% of eligible expenses | n/a |
| | Annual maximum | \$500 \$ per insured for the first policy year, \$2,500 per insured for each subsequent policy year | \$500 \$ per insured for the first policy year, \$1,500 per insured for each subsequent policy year |
| | Orthodontics | 50% of eligible expenses Lifetime maximum \$1,000 per child | n/a |

MONTHLY PREMIUMS - Prior to the 9% provincial tax

HEALTH - FULL Plan

| Age of the main insured as of January 1, 2026 | TYPE OF COVERAGE | | | |
|---|------------------|----------|---------------|----------|
| | INDIVIDUAL | COUPLE | SINGLE PARENT | FAMILY |
| Under age 30 | \$97.24 | \$194.48 | \$155.58 | \$243.10 |
| 30 to 34 | \$108.78 | \$217.56 | \$174.05 | \$271.95 |
| 35 to 39 | \$119.14 | \$238.28 | \$190.62 | \$297.85 |
| 40 to 44 | \$181.18 | \$362.36 | \$289.89 | \$452.95 |
| 45 to 49 | \$208.36 | \$416.71 | \$333.37 | \$520.89 |
| 50 to 54 | \$279.51 | \$559.02 | \$447.22 | \$698.78 |
| 55 to 59 | \$306.22 | \$612.44 | \$489.95 | \$765.55 |
| 60 to 64 | \$358.79 | \$717.57 | \$574.06 | \$851.84 |

HEALTH - BASIC Plan

| Age of the main insured as of January 1, 2026 | TYPE OF COVERAGE | | | |
|---|------------------|----------|---------------|----------|
| | INDIVIDUAL | COUPLE | SINGLE PARENT | FAMILY |
| Under age 30 | \$62.17 | \$124.34 | \$99.48 | \$155.43 |
| 30 to 34 | \$79.00 | \$158.00 | \$126.40 | \$197.51 |
| 35 to 39 | \$86.53 | \$173.06 | \$138.44 | \$199.35 |
| 40 to 44 | \$133.84 | \$267.68 | \$214.14 | \$280.28 |
| 45 to 49 | \$147.22 | \$294.45 | \$235.56 | \$293.37 |
| 50 to 54 | \$160.61 | \$303.17 | \$256.97 | \$361.79 |
| 55 to 59 | \$195.10 | \$346.03 | \$312.16 | \$417.45 |
| 60 to 64 | \$219.59 | \$439.17 | \$351.34 | \$512.67 |

DENTAL CARE

| Age of the main insured as of January 1, 2026 | TYPE OF COVERAGE | | | |
|---|------------------|----------|---------------|----------|
| | INDIVIDUAL | COUPLE | SINGLE PARENT | FAMILY |
| BASIC Plan | \$96,97 | \$203,62 | \$184,25 | \$235.65 |
| FULL Plan | \$133,12 | \$266,24 | \$252,93 | \$310.97 |

Disclaimer

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