



Personal Health Coverage: Ontario Rate Schedule

Monthly Rates Effective December 1, 2025

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan*	OmniPlan*	Basic Prescription Drugs	Dental Care	Hospital Cash
SINGLE	Under 35	\$10.00	\$30.25	\$64.00	\$24.00	\$71.50	\$10.00
	35 - 44	\$10.25	\$32.50	\$68.25	\$32.75	\$73.00	\$10.25
	45 - 54	\$10.50	\$31.50	\$68.25	\$40.75	\$74.50	\$10.50
	55 - 59	\$13.00	\$31.50	\$68.25	\$44.75	\$73.25	\$12.50
	60 - 64	\$13.50	\$34.00	\$68.25	\$53.00	\$72.75	\$16.00
	65 - 69	\$14.50	\$43.00	\$71.50	\$31.25	\$76.50	\$29.50
	70 - 74	\$17.25	\$54.50	\$71.50	\$31.75	\$76.50	\$32.25
	75 - 79	\$19.50	\$62.75	\$77.75	\$35.00	\$78.00	\$35.50
	80 +	\$22.25	\$69.00	\$80.25	\$35.00	\$79.25	\$45.75

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan	OmniPlan	Basic Prescription Drugs	Dental Care	Hospital Cash
COUPLE	Under 35	\$14.50	\$46.25	\$101.25	\$43.25	\$143.75	\$18.50
	35 - 44	\$15.25	\$47.75	\$107.50	\$62.50	\$146.75	\$20.00
	45 - 54	\$16.25	\$48.00	\$108.25	\$73.50	\$149.75	\$21.00
	55 - 59	\$20.00	\$48.75	\$107.75	\$80.75	\$146.75	\$24.00
	60 - 64	\$22.25	\$53.25	\$108.25	\$94.50	\$145.00	\$30.50
	65 - 69	\$24.00	\$70.50	\$115.75	\$59.50	\$154.00	\$56.50
	70 - 74	\$29.00	\$84.75	\$117.25	\$60.25	\$154.00	\$63.00
	75 - 79	\$34.50	\$99.25	\$136.00	\$65.25	\$156.75	\$67.00
	80 +	\$41.50	\$110.75	\$145.75	\$65.75	\$159.50	\$87.25

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan	OmniPlan	Basic Prescription Drugs	Dental Care	Hospital Cash
FAMILY	Under 35	\$15.25	\$57.50	\$147.75	\$44.00	\$215.25	\$27.50
	35 - 44	\$17.25	\$59.75	\$153.25	\$65.25	\$221.00	\$28.75
	45 - 54	\$18.25	\$58.00	\$149.75	\$80.75	\$225.50	\$29.50
	55 - 59	\$20.75	\$59.75	\$145.50	\$88.50	\$220.25	\$33.50
	60 - 64	\$25.00	\$66.75	\$141.00	\$105.25	\$218.50	\$39.00
	65 - 69	\$27.00	\$87.25	\$147.25	\$61.25	\$231.50	\$71.00
	70 - 74	\$32.50	\$109.50	\$147.25	\$63.75	\$231.50	\$75.75
	75 - 79	\$36.00	\$123.25	\$161.50	\$67.75	\$235.75	\$81.25
	80 +	\$44.00	\$136.25	\$164.75	\$68.25	\$240.00	\$103.00

When determining your monthly rate:

- Family means three or more.
- For Couple or Family, the oldest person on the application determines the rate.
- For a Family with more than six people, add 30%.
- Additional Coverage Options can only be purchased with a health plan.
- Based on your medical history, you may be assessed a premium adjustment, be excluded for certain benefits or be declined coverage.