



AUPE St. Therese Villa Premium Rate Sheet

April 1, 2023

Benefit Cost Per Month						
	Employee Share			Employer Share		Total Monthly Premium
Supplementary Health Care	Single	\$16.34		\$49.02		\$65.36
	Family	\$40.81		\$122.44		\$163.25
Mandatory Travel Insurance Coverage until age 70	Single	\$0.21		\$0.65		\$0.86
	Family	\$0.54		\$1.62		\$2.16
Dental Care	Single	\$10.31		\$30.95		\$41.26
	Family	\$25.93		\$77.81		\$103.74
Basic Life (2 X annual salary) Coverage until age 80	per \$1,000 of Benefit	\$0.0495		\$0.1485		\$0.1980
Additional Basic Life (2 X annual salary) Coverage until age 80	per \$1,000 of Benefit	\$0.0495		\$0.1485		\$0.1980
Optional Dependent Life Coverage until spouse age 70	Spouse \$10,000 / Child \$5,000	\$3.93		N/A		\$3.93
Basic AD&D (2 X annual salary) Coverage until age 80	per \$1,000 of Benefit	\$0.0032		\$0.0098		\$0.0130
Additional Basic AD&D (2 X annual salary) Coverage until age 80	per \$1,000 of Benefit	\$0.0032		\$0.0098		\$0.0130
Optional AD&D Available in units of \$10,000 to a maximum of \$350,000	Single per \$1,000 of Benefit	\$0.0315		N/A		\$0.0315
	Family per \$1,000 of Benefit	\$0.0450		N/A		\$0.0450
Short Term Disability	66 2/3% monthly insured payroll	0.349%		1.047%		1.396%
Long Term Disability Coverage until age 65	66 2/3% monthly insured payroll	1.2315%		3.6945%		4.926%
Optional Employee/Spousal Life Employee & Spouse: Units of \$10,000 up to \$200,000 (rate per \$10,000 of benefit)	Gender X Non-Smoker	Female Non-Smoker	Male Non-Smoker	Gender X Smoker	Female Smoker	Male Smoker
Coverage until age 70	Optional Life Premiums are 100% Employee Paid					
Up to 34	\$0.41	\$0.39	\$0.49	\$0.62	\$0.59	\$0.78
35-39	\$0.49	\$0.49	\$0.50	\$0.82	\$0.78	\$1.07
40-44	\$0.70	\$0.69	\$0.78	\$1.23	\$1.17	\$1.56
45-49	\$1.21	\$1.17	\$1.46	\$2.16	\$2.04	\$2.81
50-54	\$2.01	\$1.94	\$2.43	\$3.43	\$3.20	\$4.75
55-59	\$3.31	\$3.11	\$4.45	\$5.36	\$4.85	\$8.24
60-64	\$4.31	\$3.98	\$6.20	\$6.55	\$5.82	\$10.66
65-70	\$6.33	\$5.89	\$8.80	\$8.75	\$7.81	\$14.04