

Full-Time Support Staff Group Benefit Premium Rates

Contract: 050834

Effective February 1, 2025



Mandatory Benefits	Employee %	Employer %	Monthly Premium		Waiting Period
Basic Life Insurance \$25,000	0%	100%	\$2.50		On completion of one month of continuous full-time employment.
AD&D \$25,000	0%	100%	\$0.50		On completion of one month of continuous full-time employment.
Long Term Disability (LTD)* 60% of salary	25%	75%	\$4.78 per \$100 unit		On the first of the month coincident with or following completion of three months of continuous full-time employment.
Extended Health Care (EHC)	0%	100%	\$163.01	Single	On completion of one month of continuous full-time employment.
			\$360.73	Family	
Vision Care	25%	75%	\$10.97	Single	On completion of one month of continuous full-time employment.
			\$27.95	Family	
Hearing Care	25%	75%	\$0.72	Single	On completion of one month of continuous full-time employment.
			\$1.95	Family	
Catastrophic Drug Coverage (CDC)	100%	0%	\$2.16	Single	On completion of one month of continuous full-time employment.
			\$4.81	Family	
Dental	0%	100%	\$61.39	Single	On completion of the probationary period.
			\$175.08	Family	

* Insurable earnings under the LTD plan are regular earnings based on the hourly rates shown in Appendix E of the Collective Agreement and includes the Special Allowance when applicable.

Updated 2025-05-28

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Optional Benefits	Employee %	Employer %	Monthly Premium	Waiting Period	
Supplementary Life Insurance* 1 – 5 units of \$10,000	40%	60%	\$0.11 per \$1,000 unit	On completion of one month of continuous full-time employment.	
Employee Pay-All Life Insurance 1 – 5 units of \$10,000	100%	0%	See rate per \$10,000 unit below	On completion of one month of continuous full-time employment.	
	Age: - 34 35-39 40-44 45-49 50-54 55-59 60-64				
	Cost: \$0.37 \$0.51 \$0.72 \$1.07 \$1.86 \$3.69 \$5.87				
Dependent Life Insurance \$15,000/spouse \$3,000/child	100%	0%	\$2.61	On completion of one month of continuous full-time employment.	
Spousal Supplementary Life Insurance 1 – 6 units of \$10,000	100%	0%	\$0.14 per \$1,000 unit	On completion of one month of continuous full-time employment.	
Critical Illness Insurance 1 – 25 units of \$25,000	100%	0%	See rate per \$25,000 unit below	On completion of one month of continuous full-time employment.	
	Male			Female	
	Age	Smoker	Non-Smoker	Smoker	Non-Smoker
	< 30	\$2.99	\$2.49	\$2.78	\$2.32
	30-34	\$4.90	\$3.44	\$5.70	\$4.17
	35-39	\$6.36	\$4.30	\$8.28	\$5.23
	40-44	\$11.52	\$6.66	\$14.98	\$7.98
	45-49	\$23.20	\$11.46	\$22.46	\$10.74
	50-54	\$42.13	\$18.25	\$36.10	\$16.52
	55-59	\$67.68	\$27.55	\$42.55	\$20.14
	60-64	\$108.41	\$45.43	\$54.97	\$28.77
65-69	\$189.83	\$87.25	\$87.02	\$49.89	

Note: All premium rates are subject to the appropriate provincial sales tax based on employee's provincial residence.