

Administrative Staff Benefit Rates

Sun Life Group Policy 50833

Benefit	Mandatory or Optional	Coverage	Premiums paid by	Age band	Monthly Rates by Period	
					February 1, 2021 to January 31, 2022	February 1, 2020 to January 31, 2021
Basic Life Insurance	Mandatory	66 2/3% of basic annual earnings rounded to the next higher \$1,000	AC		\$0.13 per \$1,000	\$0.09 per \$1,000
Accidental Death & Dismemberment	Mandatory	66 2/3% of basic annual earnings rounded to the next higher \$1,000	AC		\$0.02 per \$1,000	\$0.02 per \$1,000
Supplemental Life Insurance	Optional	Units of 1, 2 or 3 times basic annual earnings rounded to the next higher \$1,000 Maximum \$1,000,000	50/50 cost share		\$0.08 per \$1,000	\$0.06 per \$1,000
Dependent Life Insurance	Optional	Spouse - \$10,000 Each Child - \$5,000	Employee		\$1.48 per unit	\$1.48 per unit
Employee Pay All Life Insurance	Optional	Units of \$10,000 Maximum of 10 units (\$100,000) - Available only if maximum Supplemental Life coverage has been elected	Employee	0 to 34 years	\$0.025 per \$1,000	\$0.023 per \$1,000
				35 to 39	\$0.030 per \$1,000	\$0.027 per \$1,000
				40 to 44	\$0.044 per \$1,000	\$0.040 per \$1,000
				45 to 49	\$0.081 per \$1,000	\$0.074 per \$1,000
				50 to 54	\$0.142 per \$1,000	\$0.129 per \$1,000
				55 to 59	\$0.231 per \$1,000	\$0.210 per \$1,000
				60 to 64	\$0.367 per \$1,000	\$0.334 per \$1,000
Extended Health Care	Mandatory	See benefits at a glance for details.	AC	Single	\$121.25	\$97.00
				Family	\$251.23	\$200.98
Vision Care	Mandatory	See benefits at a glance for details.	3/4 AC 1/4 EE cost share	Single	\$11.34	\$9.86
				Family	\$33.63	\$29.24
Hearing Care	Mandatory	See benefits at a glance for details.	AC	Single	\$0.89	\$0.71
				Family	\$2.65	\$2.12
Dental Care	Mandatory	See benefits at a glance for details.	AC	Single	\$44.35	\$44.35
				Family	\$143.64	\$143.64
Long Term Disability	Mandatory	66/23% of monthly base salary to a max of \$25,000	2/3 AC 1/3 EE cost share		\$2.58 per \$100	\$2.39 per \$100
Critical Illness	Optional	Units of \$25,000 up to \$200,000. Medical evidence is required over \$50,000 or if a late applicant.	Employee		Please see the separate Critical Illness Rate page.	

Notes:

The above rates exclude taxes and represent monthly rates, employee paid premium rates are deducted from each pay.

Employees on unpaid leave of absence will have the option of continuing coverage by paying 100% of the cost through monthly automated bank withdrawals.