Staff Appointed under the Academic Teaching Staff; Temporary Librarian, Administrative and Professional Officer > 8 months < 12 months

Summary of Benefit Costs

As of April 1, 2025

Employer Paid Monthly Costs

Health Coverage

	Supplementary Health	Dental	EFAP
Single	$183.00	$125.50	$6.60
Family	nil	nil	

Income Protection

Long Term Disability coverage of 70% of salary	2.66% of payroll (max insured salary $ 10,000.00 per month)

Life Insurance

Basic Life Insurance coverage of $50,000	$9.00

This cost is a taxable benefit.

Employee Paid Monthly Costs

Health Coverage

	Supplementary Health	Dental	EFAP
Single	nil	nil	nil
Family	$183.00	$125.50	

Employee Paid Monthly Costs for Optional Benefits

Optional Employee Life Insurance

Monthly Cost per $10,000 unit; Maximum coverage of 50 units ($500,000).

Rates are adjusted based on your age on July 1st of each year.

	Male		Female	
Age	Non Smoker	Smoker	Non Smoker	Smoker
Under age 34	$.40	$.80	$.20	$.30
35 to 39	$.50	$1.00	$.30	$.50
40 to 44	$.60	$1.40	$.40	$.80
45 to 49	$1.10	$2.60	$.80	$1.50
50 to 54	$1.90	$4.30	$1.30	$2.40
55 to 59	$3.50	$7.50	$2.20	$3.70
60 to 64	$4.10	$9.50	$2.50	$4.00
65 to 69	$5.20	$11.70	$3.00	$4.60
70 to 74	$11.07	$25.65	$6.88	$11.00

Optional Dependant Life Insurance $9.86

Voluntary Accident Insurance Plan (ADD)

Maximum coverage of 16 units ($480,000)

Employee Coverage $.75 per $30,000 unit of coverage

Family Coverage $1.05 per $30,000 unit of coverage

You will be notified of rate increases that may occur during the annual renewal of these plans.