

# RANDSTAD

## Monthly Premium Rates



Rates effective: October 1, 2020

### TERM LIFE

MONTHLY RATES PER \$25,000

Age Band	Non-smoker		Smoker	
	Male	Female	Male	Female
Under 25	1.64	1.19	2.37	1.85
25 - 29	1.64	1.19	2.37	1.85
30 - 34	1.70	1.33	2.91	2.18
35 - 39	2.21	1.62	4.03	2.78
40 - 44	3.31	2.57	6.58	4.59
45 - 49	5.03	3.65	9.89	6.60
50 - 54	7.58	5.41	14.67	9.51
55 - 59	12.41	8.73	21.80	15.09
60 - 64	17.77	12.65	36.80	22.84
65 - 69	27.87	19.85	64.77	34.45

### CRITICAL ILLNESS

MONTHLY RATES PER \$10,000

Age Band	Non-smoker		Smoker	
	Male	Female	Male	Female
Under 25	2.07	1.96	2.68	2.37
25 - 29	2.07	1.96	2.68	2.37
30 - 34	2.16	2.75	3.04	3.74
35 - 39	2.62	3.45	4.04	5.53
40 - 44	3.83	4.70	7.12	8.91
45 - 49	5.47	5.68	11.69	11.86
50 - 54	8.89	7.59	21.95	16.57
55 - 59	12.39	9.00	23.23	19.00
60 - 64	20.38	12.75	51.28	24.43
65 - 69	33.51	18.07	113.19	31.41

### ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE RIDER

The monthly premium rates per \$25,000 of AD&D coverage is \$2.50.

### EXTENDED HEALTHCARE - BASIC OPTION

Age Band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU & YT
<b>Single</b>											
0 - 29	60.37	59.68	51.28	54.58	54.70	51.04	63.60	54.02	48.61	55.64	55.43
30 - 44	61.70	59.68	52.29	56.12	55.48	51.82	63.60	54.02	51.17	55.64	56.66
45 - 54	68.88	68.57	61.17	69.96	70.00	62.61	73.58	65.26	63.55	64.00	63.26
55 - 59	73.08	71.47	64.17	82.29	82.92	69.25	78.28	75.28	67.94	67.97	67.12
60 - 64	78.00	73.67	68.76	92.25	96.61	76.95	83.94	79.61	74.26	72.93	71.63
65 - 69	66.63	64.01	72.17	94.77	105.41	60.50	69.42	82.93	70.99	74.80	50.82
70 - 74**	74.61	71.70	85.38	106.14	118.27	67.74	80.71	92.99	79.57	84.55	56.89
75 - 79**	79.82	76.74	91.42	113.56	126.70	72.53	86.42	99.58	85.20	90.55	60.83
80 - 84**	86.11	82.86	98.66	122.67	136.80	78.31	93.26	107.48	91.93	97.68	65.60
85 - 99**	102.29	99.42	117.30	159.48	162.82	93.25	110.84	127.84	109.33	116.19	77.81
<b>Couple (Rate per person)</b>											
0 - 29	54.33	53.69	46.15	49.13	49.24	45.93	57.24	48.60	43.75	50.08	49.64
30 - 44	55.54	53.69	47.08	50.50	49.94	46.65	57.24	48.60	45.94	50.08	50.75
45 - 54	61.99	61.71	55.06	62.96	63.01	56.35	66.22	58.74	57.18	57.61	56.66
55 - 59	65.78	64.33	57.76	74.05	74.62	62.32	70.46	67.76	61.13	61.17	60.13
60 - 64	70.31	66.30	61.91	83.02	86.96	69.26	75.55	71.65	66.81	65.63	64.30
65 - 69	59.95	57.63	64.94	85.28	94.88	54.47	62.47	74.64	63.89	67.32	45.74
70 - 74**	67.17	64.54	76.87	95.55	106.46	60.98	72.63	83.69	71.59	76.09	51.21
75 - 79**	71.87	68.93	82.28	102.20	114.04	65.29	77.77	89.62	76.68	81.51	54.75
80 - 84**	77.51	74.56	88.80	110.41	123.13	70.51	83.93	96.76	82.73	87.92	59.04
85 - 99**	92.06	89.49	105.58	143.52	146.53	83.88	99.76	115.07	98.40	104.53	70.03
<b>Dependent (Rate per person)</b>											
	29.59	20.46	19.36	24.17	22.54	22.54	29.49	22.54	21.57	18.05	22.19

Rates are calculated based on your age, gender and smoking status as of the effective date of coverage. Rates are reviewed every year, may change, and will increase as you move into the next age band. Age calculation is made at Policy Anniversary of each year.



## EXTENDED HEALTHCARE AND DENTAL INSURANCE - BASIC OPTION

Age Band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU & YT
<b>Single</b>											
0 - 29	62.24	61.52	52.87	56.28	56.39	52.61	65.57	55.68	50.12	57.37	57.15
30 - 44	63.60	61.52	53.91	57.85	57.20	53.43	65.57	55.68	52.76	57.37	58.42
45 - 54	71.01	70.70	63.06	72.12	72.17	64.56	75.86	67.29	65.52	65.98	65.22
55 - 59	75.34	73.68	66.15	84.83	85.49	71.38	80.70	77.62	70.04	70.07	69.19
60 - 64	80.41	75.94	70.90	95.11	99.61	79.32	86.54	82.07	76.56	75.19	73.84
65 - 69	68.68	65.99	74.40	97.69	108.67	62.37	71.57	85.50	73.18	77.11	52.39
70 - 74**	76.92	73.91	88.03	109.42	121.92	69.84	83.20	95.87	82.03	87.16	58.65
75 - 79**	82.29	79.11	94.25	117.08	130.63	74.78	89.09	102.66	87.82	93.36	62.71
80 - 84**	88.77	85.43	101.71	126.46	141.02	80.73	96.14	110.80	94.78	100.71	67.64
85 - 99**	105.46	102.50	120.93	164.42	167.86	96.13	114.27	131.79	112.71	119.78	80.21
<b>Couple (Rate per person)</b>											
0 - 29	56.01	55.35	47.56	50.64	50.75	47.34	59.02	50.11	45.10	51.63	51.18
30 - 44	57.26	55.35	48.54	52.06	51.48	48.09	59.02	50.11	47.36	51.63	52.33
45 - 54	63.90	63.61	56.75	64.91	64.96	58.10	68.27	60.56	58.95	59.39	58.42
55 - 59	67.82	66.32	59.55	76.34	76.93	64.24	72.63	69.86	63.02	63.06	61.99
60 - 64	72.49	68.35	63.82	85.58	89.65	71.39	77.88	73.87	68.88	67.66	66.29
65 - 69	61.80	59.41	66.96	87.92	97.81	56.16	64.41	76.95	65.87	69.40	47.15
70 - 74**	69.23	66.53	79.24	98.51	109.75	62.87	74.88	86.27	73.80	78.44	52.79
75 - 79**	74.10	71.06	84.83	105.37	117.56	67.31	80.18	92.39	79.06	84.03	56.44
80 - 84**	79.90	76.87	91.55	113.82	126.94	72.70	86.53	99.75	85.28	90.64	60.86
85 - 99**	94.91	92.26	108.85	147.95	151.06	86.47	102.85	118.62	101.44	107.77	72.19
<b>Dependent (Rate per person)</b>											
	30.50	21.10	19.97	24.92	23.24	23.24	30.40	23.24	22.23	18.61	22.88

## EXTENDED HEALTHCARE AND DENTAL INSURANCE - STANDARD OPTION

Age Band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU & YT
<b>Single</b>											
0 - 29	94.85	97.12	87.18	92.37	89.93	88.24	119.33	94.45	80.73	84.27	101.59
30 - 44	95.24	97.31	87.37	93.16	90.30	88.84	121.88	95.22	81.20	84.46	101.59
45 - 54	113.10	109.52	104.04	120.59	116.63	111.14	140.39	115.53	94.47	100.09	123.90
55 - 59	121.62	121.72	109.98	139.47	137.71	127.53	158.64	134.59	110.37	106.52	134.15
60 - 64	132.32	128.24	118.25	156.54	157.31	139.38	176.70	151.89	119.96	116.53	144.46
65 - 69	89.28	103.44	111.77	143.08	158.05	110.34	149.17	134.28	116.20	103.42	95.18
70 - 74**	105.42	114.09	125.90	164.87	187.73	116.24	188.65	159.79	135.55	125.75	106.93
75 - 79**	113.08	125.44	142.40	187.23	212.37	126.16	210.34	181.46	149.20	135.15	114.85
80 - 84**	122.34	136.39	154.54	204.63	230.60	139.21	235.75	198.15	162.36	146.47	124.29
85 - 99**	146.94	168.59	188.61	257.99	281.70	182.53	321.63	248.79	200.71	177.33	149.92
<b>Couple (Rate per person)</b>											
0 - 29	85.38	87.40	78.44	83.15	80.94	79.41	107.38	85.01	72.64	75.85	91.43
30 - 44	85.71	87.59	78.64	83.83	81.27	80.09	109.73	85.68	73.07	75.99	91.43
45 - 54	101.78	98.58	93.62	108.52	104.98	100.02	126.36	103.98	85.02	90.07	111.51
55 - 59	109.46	109.56	99.00	125.54	123.95	114.79	142.78	121.13	99.35	95.87	120.75
60 - 64	119.10	115.43	106.46	140.90	141.56	125.44	159.05	136.68	107.95	104.90	130.00
65 - 69	80.33	93.09	100.61	128.78	142.09	99.30	134.27	120.85	104.59	93.09	85.68
70 - 74**	94.86	102.83	113.31	148.39	168.94	104.64	169.79	143.83	121.98	113.17	96.25
75 - 79**	101.79	112.90	128.01	168.51	191.15	113.58	189.29	163.34	134.27	121.65	103.36
80 - 84**	110.09	122.75	139.08	184.17	207.54	125.32	212.16	178.33	146.12	131.84	111.87
85 - 99**	132.24	151.71	169.73	232.19	253.54	164.27	289.47	223.77	180.64	159.57	134.94
<b>Dependent (Rate per person)</b>											
	39.29	35.67	31.49	38.62	35.07	36.63	51.00	36.63	45.08	32.13	32.75

Rates are calculated based on your age, gender and smoking status as of the effective date of coverage. Rates are reviewed every year, may change, and will increase as you move into the next age band. Age calculation is made at Policy Anniversary of each year.

## EXTENDED HEALTH CARE AND DENTAL INSURANCE - ENHANCED OPTION

Age Band	AB	BC	MB	NB	NL	NS	ON	PE	QC	SK	NT, NU & YT
<b>Single</b>											
0 - 29	144.46	142.74	128.04	137.32	121.90	124.73	178.38	123.56	109.01	115.92	167.48
30 - 44	144.85	142.92	128.24	138.12	122.28	125.33	180.94	124.32	109.48	116.11	167.48
45 - 54	172.02	165.01	154.39	161.84	158.11	152.97	210.90	160.59	142.38	145.93	188.07
55 - 59	185.01	180.72	165.53	185.57	189.38	177.87	235.64	192.36	153.41	161.30	201.92
60 - 64	193.79	186.75	174.70	202.27	198.97	188.51	250.51	212.64	161.81	164.85	205.22
65 - 69	152.41	148.41	163.74	199.80	191.18	168.04	205.37	198.62	156.65	161.69	154.44
70 - 74**	162.95	166.99	192.41	213.96	207.89	169.13	257.80	212.93	186.08	194.92	159.03
75 - 79**	166.58	179.91	206.93	229.59	223.93	183.80	284.54	230.37	200.63	209.39	170.80
80 - 84**	180.15	195.21	224.37	252.60	243.13	201.41	316.04	246.33	218.00	226.74	184.80
85 - 99**	216.08	237.48	271.99	289.70	282.99	256.62	426.31	320.47	267.19	273.26	222.19
<b>Couple (Rate per person)</b>											
0 - 29	130.02	128.46	115.23	123.60	109.73	112.24	160.53	111.20	98.10	104.34	150.73
30 - 44	130.35	128.65	115.41	124.29	110.06	112.93	162.87	111.87	98.53	104.48	150.73
45 - 54	154.81	148.52	138.94	145.65	142.32	137.65	189.81	144.53	128.14	131.32	169.27
55 - 59	166.52	162.67	148.98	167.04	170.43	160.08	212.08	173.14	138.07	145.18	181.73
60 - 64	174.43	168.08	157.26	182.06	179.06	169.66	225.47	191.35	145.64	148.37	184.68
65 - 69	137.15	133.55	147.38	179.83	171.92	151.23	184.83	178.74	140.99	145.53	139.01
70 - 74**	146.65	150.43	173.18	192.58	187.08	152.24	232.02	191.65	167.45	175.42	143.13
75 - 79**	149.93	161.91	186.10	206.65	201.55	165.45	256.07	207.36	180.54	188.46	153.70
80 - 84**	162.12	175.69	201.93	227.35	218.82	181.30	284.42	221.71	196.20	204.08	166.34
85 - 99**	194.48	213.73	244.77	260.73	254.71	230.96	383.68	288.28	240.48	245.91	199.97
<b>Dependent (Rate per person)</b>											
	54.96	65.84	53.44	62.70	46.30	47.85	84.07	47.85	57.64	57.31	48.41

Sun Life Assurance Company of Canada is the insurer of this product and is a member of the Sun Life group of companies.

\*\* Renewal rates only

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