



**CHRISTIAN SCHOOLS
INTERNATIONAL**

**CSI CANADA INSURANCE PLAN AND TRUST FUND
PREMIUM RATES EFFECTIVE SEPTEMBER 1, 2008**

BASIC BENEFIT PLAN

Coverage: Single includes Extended Health, Dental, Life, Accidental Death & Dismemberment, Short Term Disability and Long Term Disability.
Family includes single coverage plus dependent Extended Health, Dental, Life and Accidental Death & Dismemberment.
Both single and family include the Dynamic Therapeutic Formulary drug plan.

Province	Flex 1	Flex 2	Flex 3	Standard
ALBERTA				
Single: dollar amount + % of monthly salary	\$102.00 +1.618% Tax +1.564% Non	\$89.00 +1.618% Tax +1.564% Non	\$76.00 +1.618% Tax +1.564% Non	\$94.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$297.55 +1.618% Tax +1.564% Non	\$258.55 +1.618% Tax +1.564% Non	\$220.55 +1.618% Tax +1.564% Non	\$268.45 +1.446% Tax +1.392% Non
BRITISH COLUMBIA				
Single: dollar amount + % of monthly salary	\$87.00 +1.618% Tax +1.564% Non	\$75.00 +1.618% Tax +1.564% Non	\$65.00 +1.618% Tax +1.564% Non	\$80.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$254.55 +1.618% Tax +1.564% Non	\$221.55 +1.618% Tax +1.564% Non	\$188.55 +1.618% Tax +1.564% Non	\$228.45 +1.446% Tax +1.392% Non
MANITOBA				
Single: dollar amount + % of monthly salary	\$87.00 +1.618% Tax +1.564% Non	\$76.00 +1.618% Tax +1.564% Non	\$65.00 +1.618% Tax +1.564% Non	\$81.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$253.55 +1.618% Tax +1.564% Non	\$220.55 +1.618% Tax +1.564% Non	\$188.55 +1.618% Tax +1.564% Non	\$228.45 +1.446% Tax +1.392% Non
ONTARIO				
Single: dollar amount + % of monthly salary	\$123.00 +1.747% Tax +1.689% Non	\$107.00 +1.747% Tax +1.689% Non	\$92.00 +1.747% Tax +1.689% Non	\$114.65 +1.562% Tax +1.504% Non
Family: dollar amount + % of monthly salary	\$358.60 +1.747% Tax +1.689% Non	\$310.60 +1.747% Tax +1.689% Non	\$265.60 +1.747% Tax +1.689% Non	\$323.70 +1.562% Tax +1.504% Non
PRINCE EDWARD ISLAND				
Single: dollar amount + % of monthly salary	\$84.00 +1.618% Tax +1.564% Non	\$73.00 +1.618% Tax +1.564% Non	\$62.00 +1.618% Tax +1.564% Non	\$78.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$245.55 +1.618% Tax +1.564% Non	\$212.55 +1.618% Tax +1.564% Non	\$182.55 +1.618% Tax +1.564% Non	\$220.45 +1.446% Tax +1.392% Non
SASKATCHEWAN				
Single: dollar amount + % of monthly salary	\$86.00 +1.618% Tax +1.564% Non	\$75.00 +1.618% Tax +1.564% Non	\$64.00 +1.618% Tax +1.564% Non	\$79.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$248.55 +1.618% Tax +1.564% Non	\$215.55 +1.618% Tax +1.564% Non	\$184.55 +1.618% Tax +1.564% Non	\$223.45 +1.446% Tax +1.392% Non

(More)

LIMITED BENEFIT PLAN

Coverage: Single includes Life, Accidental Death & Dismemberment, Short Term Disability and Long Term Disability.
Family includes single coverage plus dependent Life and Accidental Death & Dismemberment.

ONTARIO	Flex 1	Flex 2	Flex 3	Standard
Single: dollar amount + % of monthly salary	1.747% Tax 1.689% Non	1.747% Tax 1.689% Non	1.747% Tax 1.689% Non	\$3.65 +1.562% Tax +1.504% Non
Family: dollar amount + % of monthly salary	\$2.60 +1.747% Tax +1.689% Non	\$2.60 +1.747% Tax +1.689% Non	\$2.60 +1.747% Tax +1.689% Non	\$4.70 +1.562% Tax +1.504% Non
ALL OTHER				
Single: dollar amount + % of monthly salary	1.618% Tax 1.564% Non	1.618% Tax 1.564% Non	1.618% Tax 1.564% Non	\$2.60 +1.446% Tax +1.392% Non
Family: dollar amount + % of monthly salary	\$2.55 +1.618% Tax +1.564% Non	\$2.55 +1.618% Tax +1.564% Non	\$2.55 +1.618% Tax +1.564% Non	\$3.45 +1.446% Tax +1.392% Non

BENEFIT OPTIONS

Province	Options available with both Standard and Flex Plans		Options available with Flex Plans					
	Employee Assistance Plan	Non-Tax Disability Benefit Option	6 Month Dental Option	Vision Option	LTD 3% COLA Option	Drug Plan Option		
						Flex 1	Flex 2	Flex 3
ALBERTA								
Single:	\$2.75	.129% of Salary	\$1.25	\$7.25	\$5.25 Tax	\$1.25	\$1.00	\$1.00
Family:			\$3.50	\$16.75	\$5.50 Non	\$3.25	\$3.00	\$2.50
BRITISH COLUMBIA								
Single:	\$2.75	.129% of Salary	\$1.25	\$5.50	\$5.25 Tax	\$1.00	\$0.75	\$0.75
Family:			\$3.50	\$12.75	\$5.50 Non	\$2.50	\$2.25	\$1.75
MANITOBA								
Single:	\$2.75	.129% of Salary	\$1.00	\$6.25	\$5.25 Tax	\$1.00	\$1.00	\$0.75
Family:			\$3.00	\$14.50	\$5.50 Non	\$2.75	\$2.50	\$2.00
ONTARIO								
Single:	\$3.00	.139% of Salary	\$1.50	\$8.50	\$5.75 Tax	\$1.50	\$1.25	\$1.00
Family:			\$4.25	\$19.75	\$6.00 Non	\$3.75	\$3.25	\$2.75
PRINCE EDWARD ISLAND								
Single:	\$2.75	.129% of Salary	\$1.00	\$6.25	\$5.25 Tax	\$1.00	\$1.00	\$0.75
Family:			\$3.00	\$14.75	\$5.50 Non	\$2.75	\$2.50	\$2.00
SASKATCHEWAN								
Single:	\$2.75	.129% of Salary	\$1.00	\$6.25	\$5.25 Tax	\$1.00	\$1.00	\$0.75
Family:			\$3.00	\$14.50	\$5.50 Non	\$2.75	\$2.25	\$2.00

OPTIONAL LIFE INSURANCE COVERAGE

Age	ONTARIO		ALL OTHER PROVINCES	
	Monthly rate per \$10,000 of benefit		Monthly rate per \$10,000 of benefit	
	Non-Smoker	Smoker	Non-Smoker	Smoker
Under 35	\$0.40	\$0.80	\$0.40	\$0.70
35-39	\$0.50	\$1.00	\$0.50	\$0.90
40-44	\$0.90	\$1.60	\$0.80	\$1.50
45-49	\$1.50	\$2.80	\$1.40	\$2.60
50-54	\$2.50	\$4.20	\$2.30	\$3.90
55-59	\$4.10	\$6.90	\$3.80	\$6.40
60-64	\$5.90	\$9.80	\$5.50	\$9.10
65-69	\$7.70	\$13.80	\$7.20	\$12.80

OPTIONAL CRITICAL ILLNESS COVERAGE

Age	ONTARIO*				ALL OTHER PROVINCES			
	Monthly rate per \$1,000 of benefit				Monthly rate per \$1,000 of benefit			
	Male		Female		Male		Female	
	Nonsmoker	Smoker	Nonsmoker	Smoker	Nonsmoker	Smoker	Nonsmoker	Smoker
18-24	\$.126	\$.151	\$.118	\$.146	\$.117	\$.140	\$.109	\$.135
25-29	\$.141	\$.175	\$.139	\$.178	\$.131	\$.162	\$.129	\$.165
30-34	\$.181	\$.240	\$.194	\$.264	\$.167	\$.222	\$.179	\$.244
35-39	\$.258	\$.385	\$.282	\$.416	\$.239	\$.356	\$.261	\$.385
40-44	\$.394	\$.684	\$.417	\$.668	\$.365	\$.634	\$.386	\$.618
45-49	\$.602	\$1.260	\$.621	\$1.127	\$.558	\$1.167	\$.575	\$1.044
50-54	\$.961	\$2.308	\$.908	\$1.833	\$.890	\$2.137	\$.840	\$1.697
55-59	\$1.637	\$4.058	\$1.339	\$2.844	\$1.516	\$3.758	\$1.240	\$2.633
60-64	\$2.726	\$6.501	\$1.990	\$4.238	\$2.525	\$6.019	\$1.843	\$3.924
65-69	\$4.200	\$9.454	\$3.009	\$6.110	\$3.889	\$8.754	\$2.786	\$5.657
Child Coverage	\$2.20				\$2.05			

PERSONAL PREMIUM WORKSHEET

To calculate your monthly premium as of September 1, 2008, complete this worksheet using the rates on the Monthly Premium Rate Comparison:

1. Basic Benefit Plan (Includes the Limited Benefit Plan)

a. Flat Dollar Premium = _____(a)

b. _____/12 x _____% = _____(b)
 (annual salary) (percent of salary from rate sheet)

c. Benefit Options (as chosen by your school)

• LTD 3% Cost of Living (with Flex plans only) = _____

• Vision Care (with Flex plans only) = _____

• 6 Month Dental Recall (with Flex plans only) = _____

• Drug Plan Option (with Flex plans only) = _____

• Non-Tax Disability Option (with Standard or Flex plans)

_____ /12 x _____% = _____
 (annual salary) (percent of salary from rate sheet)

Sub Total Benefit Options = _____(c)

Total Monthly Premium (a + b + c) = _____

2. Limited Benefit Plan

a. Flat Dollar Premium = _____(a)

b. _____/12 x _____% = _____(b)
 (annual salary) (percent of salary from rate sheet)

c. Benefit Options (as chosen by your school)

• LTD 3% Cost of Living (with Flex plans only) = _____

• Non-Tax Disability Option (with Standard or Flex plans)

_____ /12 x _____% = _____
 (annual salary) (percent of salary from rate sheet)

Sub Total Benefit Options = _____(c)

Total Monthly Premium (a + b + c) = _____

EXAMPLES

- Employee has single coverage in the Standard Plan with the taxable disability benefit. Employee lives in British Columbia and has an annual salary of \$35,000.

Standard Plan Health/Dental/Life/AD&D	\$ 80.60
Taxable Disability: (\$35,000/12) x .01446	<u>42.17</u>
Total Monthly Premium:	\$122.77

- Employee has family coverage in Flex Option 1, non-tax disability, and vision care. Employee B lives in Ontario and has an annual salary of \$45,000.

Flex Option 1 Health/Dental	358.60
Life/AD&D/Disability: (\$45,000/12) x .01689	\$ 63.34
Vision Care	<u>19.75</u>
Total Monthly Premium:	\$441.69