

Voluntary Long Term Disability Insurance Premiums – Policy 59999

Male Resident Member Rates

ANNUAL RATES

MALE NON-SMOKER			
90 Day Elimination Period			
	Base Plan including COLA and GIB	Own Occupation*	Retirement Protection*
Age	per \$100 of Coverage		For \$500
Under 35	4.31	1.80	34.71
35-39	6.23	2.60	50.21
40-44	10.24	4.27	82.41
45-49	12.00	5.00	96.58
50-54	16.10	6.71	129.62
55-59	18.19	7.58	146.35
60-64	20.79	8.66	167.37
65-69	14.30	-	-

ANNUAL RATES

MALE SMOKER			
90 Day Elimination Period			
	Base Plan including COLA and GIB	Own Occupation*	Retirement Protection*
Age	per \$100 of Coverage		For \$500
Under 35	6.18	2.58	43.78
35-39	8.94	3.73	63.33
40-44	13.96	5.82	96.88
45-49	16.35	6.82	115.87
50-54	21.96	9.15	155.54
55-59	24.79	10.33	175.61
60-64	28.35	11.81	200.84
65-69	19.50	-	-

*Add to basic disability premium

How to calculate your premium

Example: male, non-smoker, age 30 for \$4,000 of coverage

	Annual	Per Month
Base Benefit, including COLA 40 units at \$4.31/unit	\$172.40	\$14.37
Own Occupation Rider 40 units at \$1.80/unit	\$72.00	\$6.00
Retirement Protection Rider \$500 monthly benefit	\$34.71	\$2.89
Total for all benefits	\$279.11	\$23.26

May 2017

T 604 736 5551
F 604 638 2909
TF 1 800 665 2262

115—1665 West Broadway
Vancouver BC V6J 5A4

doctorsofbc.ca

Female Resident Member Rates

ANNUAL RATES

FEMALE NON-SMOKER 90 Day Elimination Period			
	Base Plan including COLA and GIB	Own Occupation	Retirement Protection
Age	per \$100 of Coverage		For \$500
Under 35	8.61	3.59	54.45
35-39	12.46	5.19	78.78
40-44	17.53	7.30	110.86
45-49	19.44	8.10	122.95
50-54	26.56	11.07	167.98
55-59	28.23	11.76	178.55
60-64	30.38	12.66	192.16
65-69	20.89	-	-

ANNUAL RATES

FEMALE SMOKER 90 Day Elimination Period			
	Base Plan including COLA and GIB	Own Occupation	Retirement Protection
Age	per \$100 of Coverage		For \$500
Under 35	10.32	4.30	65.31
35-39	14.94	6.23	94.53
40-44	23.33	9.72	147.56
45-49	27.34	11.39	172.93
50-54	31.87	13.28	201.59
55-59	33.87	14.12	214.25
60-64	36.45	15.19	230.57
65-69	25.07	-	-

*Add to basic disability premium

How to calculate your premium

Example: female, non-smoker, age 30 for \$4,000 of coverage

	Annual	Per Month
Base Benefit, including COLA 40 units at \$8.61/unit	\$344.40	\$28.70
Own Occupation Rider 40 units at \$3.59/unit	\$143.60	\$11.97
Retirement Protection Rider \$500 monthly benefit	\$54.45	\$4.54
Total for all benefits	\$542.45	\$45.20

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