HBTA Health Benefit Trust of Alberta

ALBERTA PRECISION LABORATORIES
Leaders in Laboratory Medicine

PREMIUM RATE SHEET

HSAA Professional / Technical Section A11

HSAA Office / Clerical Section A21

May 1, 2026

		BENEFIT COST PER MONTH		
		Employee Share	**Employer Share**	**Total Monthly Premium**
Supplementary Health Includes Out of Province/Country Emergency Health	*Single*	$32.91	$98.74	$131.65
	Family	$82.32	$246.96	$329.28
Dental	*Single*	$16.31	$48.94	$65.25
	Family	$40.79	$122.37	$163.16
Basic Life *per $1,000 of insurance*		$0.0242	$0.0728	$0.097
Additional Basic Life *per $1,000 of insurance*		$0.0970	$0.0000	$0.097
Optional Dependent Life *Spouse $25,000, each Child $10,000*		$6.74	$0.00	$6.74
Basic AD&D *per $1,000 of insurance*		$0.0023	$0.0072	$0.0095
Additional Basic AD&D *per $1,000 of insurance*		$0.0095	$0.0000	$0.0095
Optional AD&D *per $1,000 of insurance*	*Employee*	$0.0210	$0.0000	$0.0210
	Family	$0.0300	$0.0000	$0.0300
Short Term Disability *% of monthly insured payroll*		0.244%	0.734%	0.978%
Long Term Disability *% of monthly insured payroll*		0.911%	2.736%	3.647%

Optional Employee Life *per $1,000 of insurance*	**Male Non-Smoker**	**Male Smoker**	**Female Non-Smoker**	**Female Smoker**	**Gender X Non-Smoker**	**Gender X Smoker**
Under 30	$0.046	$0.074	$0.037	$0.056	$0.042	$0.067
30-34	$0.046	$0.074	$0.037	$0.056	$0.042	$0.067
35-39	$0.048	$0.103	$0.046	$0.074	$0.047	$0.091
40-44	$0.074	$0.149	$0.066	$0.112	$0.071	$0.134
45-49	$0.140	$0.270	$0.112	$0.196	$0.128	$0.239
50-54	$0.233	$0.456	$0.186	$0.307	$0.213	$0.394
55-59	$0.428	$0.791	$0.298	$0.466	$0.374	$0.656
60-64	$0.600	$1.024	$0.382	$0.559	$0.510	$0.831
65-69	$0.846	$1.349	$0.565	$0.750	$0.729	$1.100

When applicable, actual rates will be rounded to the nearest cent. In the event of a discrepancy, and/or any errors and/or omissions in this publication, the terms and conditions of official contracts and documents of our group plans will prevail.