



Accidental Death & Dismemberment

Employee Options	12-Month Premiums: Employee Only	12-Month Premiums: Family
\$27,500	\$0.52	\$0.77
\$55,000	\$1.05	\$1.54
\$82,500	\$1.57	\$2.31
\$110,000	\$2.09	\$3.08
\$165,000	\$3.14	\$4.62
\$220,000	\$4.18	\$6.16
\$275,000	\$5.23	\$7.70
\$300,000	\$5.70	\$8.40

Family members may be insured for a portion of the employee's principal sum

- Spouse: 50% of employee's elected amount if no insured Dependent Child(ren); 40% if insured Dependent children
- Child(ren): 15% of employee's elected amount if no insured Spouse; 10% if insured Spouse

Scheduled Benefit Amounts

Below is a brief list of injuries and benefits payable based on the amount of coverage selected. Please see the Certificate of Coverage for more information on covered benefits.

Injury	Benefit Paid
Death	100%
Loss of both hands or feet	100%
Loss of sight in both eyes	100%
Quadriplegia	100%

Injury	Benefit Paid
Paraplegia	75%
Loss of one hand or foot	50%
Coma	50%
Loss of speech or hearing	50%
Thumb and Index Finger	25%

AD&D Insurance Features

- Child Care Expense
- Education Benefit
- Repatriation Benefit
- Common Carrier Hazard Benefit

Contact Information

UnitedHealthcare:
1-888-299-2070
Policy #303972