

INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below.

COMPLETE DISLOCATION	PLAN 1	PLAN 2
Hip joint	\$4,000	\$6,000
Knee or ankle joint ▲, bone or bones of the foot ▲	\$1,600	\$2,400
Wrist joint	\$1,400	\$2,100
Elbow joint	\$1,200	\$1,800
Shoulder joint	\$800	\$1,200
Bone or bones of the hand ▲, collarbone	\$600	\$900
Two or more fingers or toes	\$280	\$420
One finger or toe	\$120	\$180
COMPLETE, SIMPLE OR CLOSED FRACTURE	PLAN 1	PLAN 2
Hip, thigh (femur), pelvis **	\$4,000	\$6,000
Skull **	\$3,800	\$5,700
Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	\$2,200	\$3,300
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	\$1,600	\$2,400
Foot **, hand or wrist **	\$1,400	\$2,100
Lower jaw **	\$800	\$1,200
Two or more ribs, fingers or toes, bones of face or nose	\$600	\$900
One rib, finger or toe, coccyx	\$280	\$420
LOSS	PLAN 1	PLAN 2
Life, hearing, speech, or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg	\$40,000	\$60,000
One eye, hand, arm, foot, or leg	\$20,000	\$30,000
One or more entire toes or fingers	\$4,000	\$6,000

▲ Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers). ** Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).

PLAN 1 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Weekly	\$2.60	\$4.49	\$5.52	\$7.19
Bi-Weekly	\$5.20	\$8.98	\$11.04	\$14.38
Semi-Monthly	\$5.63	\$9.73	\$11.96	\$15.58

EE=Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); F = Family

PLAN 2 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Weekly	\$3.61	\$6.24	\$7.72	\$9.92
Bi-Weekly	\$7.22	\$12.48	\$15.44	\$19.84
Semi-Monthly	\$7.81	\$13.51	\$16.72	\$21.48

EE=Employee; EE + SP = Employee + Spouse; EE + CH = Employee + Child(ren); F = Family

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BENEFITS

)/F; 2.0U AUC; 2.0U ERS; 2.0U ADD; 2.0U BER; 2.0U OPH w/o sick; 24 Hour
*)/F; 3.0U AUC; 3.0U ERS; 3.0U ADD; 3.0U BER; 2.0U OPH w/o sick; 24 Hour

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