UnitedHealthcare

Accident Protection Plan Proposal for City of Round Rock

Effective Date: 01/01/2024

Accident Protection Plan v2	Custom	
Legal Entity	UnitedHealthcare Insurance Company	
	All Active Full Time Free laws consulting a minimum of 20 hours accurate	
Eligibility	All Active Full Time Employees working a minimum of 30 hours per week	
Plan Design	24 Hour	
Waiver of Premium	Included	
Portability	Included	
Telephonic Claim Submission	Included	
Benefits	Included	
Accidental Death & Dismemberment		
Life	\$20,000	
Both hands or both feet	\$20,000	
One hand and one foot	\$20,000	
One hand or one foot	\$10,000	
Two or more fingers or toes	\$4,000	
One finger or one toe	\$2,000	
Accidental Death Common Carrier	<i><i><i><i><i>i</i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i>,<i></i></i></i></i>	
Life	\$80,000	
	(Child benefit 50% of employee/spouse)	
nitial Care		
Ground Ambulance	\$300	
Air Ambulance	\$1,800	
Emergency Room Treatment	\$150	
Physician Office/Urgent Care (per visit)	\$150	
Hospital Care		
Hospital Admission	\$1,200	
Hospital Confinement	\$250	
Hospital ICU Admission	\$2,400	
Hospital ICU Confinement	\$750	
Follow Up Care	ψισσ	
Appliances Benefit		
- Wheelchair	\$225	
- Knee Scooter	\$225	
- Knee Immobilizer	\$225	
- Lumbar Spine Brace	\$225	
- Walking Boot	\$150	
- Walker	\$130	
- Crutches	\$150	
- Leg Brace	\$150	
- Cervical Collar	\$150	
- Cervical Collar - Cane	\$75	
- Ankle Brace	\$75	
- Ankle Boot	\$75	
- Air Cast	\$75	
Follow up Physician Visit	\$75	
Major Diagnostic Exam	\$250	
Minor Diagnostic Exam	\$75	
Prosthetic	\$75	
- One Device	\$750	
- Two or More Devices	\$1,500	
Rehabilitation Facility (per day/Up to 30 days)	\$150	
Rehabilitation Therapy (per visit/up to 10 Visits)	\$30	
Common Injuries Abdominal/Thoracic Surgery		
- Surgery to repair	\$1,500	
- Exploratory without repair	\$1,500 \$150	
Cranial Surgery	\$150	
Eye Surgery	ψυυυ	
- Removal of foreign body	\$150	
- Surgical Repair	\$150	
Hernia Surgery	\$300	

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Arthroscopic Surgery	\$300
Non-Specific Surgery	\$300
- General Anesthesia	\$300
- Conscious Sedation	\$300
	\$100
Tendon / Ligament / Shoulder Cartilage / Rotator Cuff	
/ Knee Cartilage Surgery	¢000
- Surgery to repair one	\$600
- Surgery to repair more than one	\$1,200
- Exploratory without repair	\$200
Blood/Plasma/Platelets	\$400
Burns	
- 2nd Degree (at least 36% of body surface)	\$750
- 3rd Degree (9 to 34 sq. inches)	\$1,500
- 3rd Degree (35 or more sq. inches)	\$12,000
	Skin Graft = 25% of burn benefit
Coma	\$15,000
Concussion	\$200
Lacerations	+=->>
- Greater Than 15 cm	\$600
- 5 cm - 15 cm	\$300
- Less Than 5 cm	\$75
- Not Requiring Sutures	\$45
Paralysis	ΨτΨ
- Quadriplegia	\$15,000
- Hemiplegia	\$7,500
- Paraplegia	\$7,500
Ruptured / Herniated Disc	\$600
Emergency Dental Work	ψουο
- Crown(s)	\$300
- Extraction(s)	\$500
	\$150
Medical Supplies / Over-the-counter(one time per	¢20
plan year)	\$20
Family Child Daycare (per day up to 30 days)	\$45
Lodging (per day up to 30 days)	\$225
Transportation (for special treatment more than 100	Å 000
miles away, maximum of 3 trips per accident)	\$300
Fractures	Open Reduction / Closed Reduction
- Skull (Depressed, except bones of face or nose)	\$6,000 / \$3,000
- Sternum	\$6,000 / \$3,000
- Hip, Thigh (Femur)	\$6,000 / \$3,000
- Skull (Simple, except bones of face or nose)	\$3,250 / \$1,625
- Leg (from top of tibia to ankle joint)	\$3,250 / \$1,625
- Pelvis (Excluding Coccyx)	\$3,250 / \$1,625
- Vertebrae (body of)	\$3,250 / \$1,625
- Sacral / Sacrum	\$1,200 / \$600
- Face or Nose (except teeth)	\$1,200 / \$600
- Upper Arm (Elbow to Shoulder)	\$1,200 / \$600
- Upper Jaw (except Alveolar process)	\$1,200 / \$600
- Ankle	\$1,200 / \$600
- Foot (except Toes)	\$1,200 / \$600
- Forearm, Hand, Wrist (except Fingers)	
	\$1,200 / \$600
- Kneecap	\$1,200 / \$600
- Lower Jaw (except Alveolar process)	\$1,200 / \$600
- Shoulder Blade or Collarbone	\$1,200 / \$600
- Vertebral Process	\$1,200 / \$600
- Соссух	\$1,000 / \$500
- Finger or Toe	\$450 / \$225
	Chip Fractures: 25% of amounts shown for Closed Reduction
Dislocations	Open Reduction / Closed Reduction

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- Hip	\$6,000 / \$3,000
- Elbow	\$1,350 / \$675
- Ankle	\$2,250 / \$1,125
- Collar Bone (Sternoclavicular)	\$1,350 / \$675
- Foot (except toes)	\$2,250 / \$1,125
- Hand	\$1,350 / \$675
- Knee Cap (Patella)	\$3,400 / \$1,700
- Lower Jaw	\$1,350 / \$675
- Shoulder Blade	\$1,350 / \$675
- Wrist	\$1,350 / \$675
- Collerbone (Acromioclavicular separation)	\$750 / \$375
- Finger or Toe	\$750 / \$375
Organized Sporting Activity Injury	Increases amounts payable under Follow Up Care and Common Injuries sections by 25%
Additional Benefits	
Wellness Benefit Rider	\$50, Employee and Insured Spouse
Quoted Monthly Rates	Voluntary
Benefits+Rider(s)	
Employee	\$7.94
Employee + Spouse	\$12.54
Employee + Child(ren)	\$15.42
Employee + Spouse + Child(ren)	\$23.72
Number of Eligible Employees	986
Employer Contribution- Employee Coverage	0%
Employer Contribution- Dependent Coverage	0%
Participation Requirements- Employee Coverage	Waived
Broker Commissions	Flat 15.0%
Rate Guarantee (in months)	36
Implementation/Marketing Credit	One time implementation credit up to \$850