

**Eligibility: All Active Full Time Employees working a minimum of 30 Hours per week.**

**Employee Voluntary Long Term Disability - Current Weekly Cost by Age Band**

Current Monthly Rates per \$100:		0.081	0.108	0.165	0.329	0.508	0.915	1.223	1.365	1.319	1.319
Annual Earnings	Monthly Benefit	Age <25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
\$20,000	\$1,000.00	0.31	0.42	0.63	1.27	1.95	3.52	4.70	5.25	5.07	5.07
\$25,000	\$1,250.00	0.39	0.52	0.79	1.58	2.44	4.40	5.88	6.56	6.34	6.34
\$30,000	\$1,500.00	0.47	0.62	0.95	1.90	2.93	5.28	7.06	7.87	7.61	7.61
\$35,000	\$1,750.00	0.55	0.73	1.11	2.21	3.42	6.16	8.23	9.19	8.88	8.88
\$40,000	\$2,000.00	0.62	0.83	1.27	2.53	3.91	7.04	9.41	10.50	10.15	10.15
\$45,000	\$2,250.00	0.70	0.93	1.43	2.85	4.40	7.92	10.58	11.81	11.41	11.41
\$50,000	\$2,500.00	0.78	1.04	1.59	3.16	4.88	8.80	11.76	13.12	12.68	12.68
\$55,000	\$2,750.00	0.86	1.14	1.75	3.48	5.37	9.68	12.94	14.44	13.95	13.95
\$60,000	\$3,000.00	0.93	1.25	1.90	3.80	5.86	10.56	14.11	15.75	15.22	15.22
\$65,000	\$3,250.00	1.01	1.35	2.06	4.11	6.35	11.44	15.29	17.06	16.49	16.49
\$70,000	\$3,500.00	1.09	1.45	2.22	4.43	6.84	12.32	16.46	18.37	17.76	17.76
\$75,000	\$3,750.00	1.17	1.56	2.38	4.75	7.33	13.20	17.64	19.69	19.02	19.02
\$80,000	\$4,000.00	1.25	1.66	2.54	5.06	7.82	14.08	18.82	21.00	20.29	20.29
\$85,000	\$4,250.00	1.32	1.77	2.70	5.38	8.30	14.96	19.99	22.31	21.56	21.56
\$90,000	\$4,500.00	1.40	1.87	2.86	5.69	8.79	15.84	21.17	23.62	22.83	22.83
\$95,000	\$4,750.00	1.48	1.97	3.01	6.01	9.28	16.72	22.34	24.94	24.10	24.10
\$100,000	\$5,000.00	1.56	2.08	3.17	6.33	9.77	17.60	23.52	26.25	25.37	25.37

If your annual earnings are not shown above, use the formula below to calculate the cost of coverage:

$$\frac{\$ \text{Annual Earnings}}{12} = \$ \text{Monthly Earnings}$$

$$\$7,500.00 \text{ Benefit Maximum} \div 60\% \text{ Benefit} = \mathbf{\$12,500.00 \text{ Maximum Covered Monthly Earnings}}$$

*The lesser of the calculated Monthly Earnings or the Maximum Covered Monthly Earnings is used for the Covered Monthly Earnings below.*

$$\frac{\$ \text{Covered Monthly Earnings}}{\text{Rate}} \times \text{Subtotal} \div 100 = \$ \text{Monthly Cost} \times 12 \div 52 = \$ \text{Weekly Cost}$$

(See top row above)

*Rates shown are current as of the effective date and are subject to change over time.*

*Costs shown are estimates only. Your actual payroll deduction may be slightly higher or lower from those provided here.*

UnitedHealthcare Life and Disability products are provided by UnitedHealthcare Insurance Company, and certain products in California by Unimerica Life Insurance Company. Texas Coverage is provided on Form LASD-POL-TX (05/03), Form UHCLD-POL 2/2008-TX, or UICLD-POL-TX 4/5.