## City of Rochester Hills

## Date: 6/22/12

City of Rochester Hills			Date: 6/22/12
Accident & Sickness Insurance			
	VFIS - Current	VFIS - Renewal	Michigan Planners, Inc.
	National Union Fire Insurance Company of		
	Pittsburgh, PA.	Pittsburgh, PA.	Provident
COVERAGE	AMOUNT OF INSURANCE	AMOUNT OF INSURANCE	AMOUNT OF INSURANCE
Loss of Life Benefits			
<ul> <li>A. Accidental Death Benefits</li> <li>(i) Accidental Death Indemnity Benefit</li> </ul>	\$100,000	\$100,000	\$100,000
(ii) Seat Belt Benefit Amount	\$100,000 \$25,000	\$25,000	\$25,000
B. Illness Loss of Life Benefit	\$25,000 \$100,000	\$25,000 \$100,000	\$100,000
C. Dependent Benefit Amount (Per Dependent Child)	\$10,000	\$10,000	\$10,000
D. Spousal Support Benefit Amount	\$5,000	\$5,000	Not Included in Proposal
E. Memorial Benefit Amount	\$2,000	\$2,000	Up to \$10,000
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Lump Sum Living Benefits			
A. Accidental Dismemberment Principal Sum	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
B. Vision Impairment Benefit	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
C. Injury Permanent Impairment	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
D. Cosmetic Disfigurement Resulting From Burns	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
E. HIV Positive Benefit	\$100,000	\$100,000	\$100,000
F. Heart Permanent Impairment	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
G. Illness Permanent Impairment	\$100,000	\$100,000	Up to \$100,000 <sup>1</sup>
Weekly Income Benefits			
A. Total Disability Benefit			
(1) Total Disability Weekly Income Benefit (first 28 days)	\$300	\$300	Up to \$900 <sup>2,3</sup>
(2) Total Disability Maximum Weekly Amount (after 28 days)	\$900	\$900	Up to \$900 <sup>2,3</sup>
(3) Total Disability Minimum Weekly Amount	\$900	\$75	\$75
B. Partial Disability Benefit	212	215	215
(1) Partial Disability Weekly Income Benefit (first 28 days)	\$150	\$150	Up to \$900
(2) Partial Disability Maximum Weekly Amount (after 28 days)	\$450	\$450	Up to \$900
(3) Partial Disability Minimum Weekly Amount	\$38	\$38	Not Included in Proposal
C. Occupational Retraining Benefit Maximum Amount	\$20,000	\$20,000	Up to \$20,000
D. Weekly Permanent Physical Impairment Benefit	Included	Included	Not Included in Proposal
E. Optional Weekly Permanent Physical Impairment COLA Benefit	Included	Included	Up to \$2,700
Medical Expense Benefits			
A. Medical Expense Maximum Amount	\$10,000	\$10,000	Up to \$10,000 <sup>4</sup>
B. Cosmetic/Plastic Surgery Maximum Amount	\$10,000	\$10,000	Up to $$10,000^{4}$
C. Post Traumatic Stress Disorder Maximum Amount	\$10,000	\$10,000	Up to \$2,500
D. Critical Incident Stress Management Maximum Amount (Per Covered A		\$2,500	Up to \$10,000
E. Family Expense Benefit	\$100	\$100	Up to \$20,000
F. Continuation of Health Insurance Premium Maximum Amount	\$12,000	\$12,000	Up to \$12,000
G. Transition	Included	Included	Up to \$900
H. Felonious Assault	Included	Included	Up to \$25,000
I. Home Alternation and Vehicle Modification Maximum Amount	\$15,000	\$15,000	\$15,000
Grand Total Vol. and Career Prem. For 3 Yr Annual Installments of:	\$22,794	\$24,549	\$21,653
GBS Commission	None	None	None

<sup>1</sup>Benefits payable are based on the percentage of impairment or loss as defined in the policy. (GBS would like a copy of the policy for review)

<sup>2</sup>Benefits are payable in coordination with the Loss of Earnings Coverage as defined in the policy. (GBS would like a copy of the policy for review)

<sup>3</sup>For the first week of total disability, the policy will pay a \$0 in coordination with any Loss of Earnings Coverage to replace the Insured Person's Weekly Earned Income. (GBS would like a copy of the policy for review, appears benefits start on day 8) <sup>4</sup>Will not pay covered medical expenses incurred by an Insured Person that are paid or payable under any other Valid and Collectible Insurance, including Workers' Compensation