| | The Brokerage Store | The Brokerage Store | Texas School Ins. | GM- Southwest | Texas Student Resources | Texas Monarch (Alamo Ins) |
|------------------------|---------------------------------------------------------------|-----------------------------------------------------------------|-------------------------|--------------------------------|----------------------------------------|----------------------------------------------------|
| Underwriter | Columbian Lifr Ins. | Columbian Lifr Ins. | Gerber Life Ins. | Pan-American Life Ins. | Mutual of Omaha Ins. | Axis Insurance |
| Plan | TX Star Plan | TX Value Plan | Plan 3 | Plan A | Premier Plan | Premium Plan |
| Policy Maximum | \$25,000.00 | \$25,000.00 | \$25,000.00 | \$25,000.00 | \$25,000.00 | \$25,000.00 |
| Room & Board | Semi Private | Semi Private | 100% U&C | 90% U&C up to \$500 / a day | Semi Private | Semi-Private daily room rate |
| Hospital Misc. | 1st day up to \$500, up to \$250 per day max \$2,500 | 1st day up to \$1,000, up to \$500 per day max \$5,000 | \$800 per day | 90% U&C \$3,500 max | Up to \$250 per day, \$5,000 Max | 100% U&C up to \$250 per day, \$5,000 Max |
| Day Surgery Misc. | | | 80% U&C \$2,000 max | \$1,250 Max. | | \$1,250 max |
| ER | \$200 max | U&C \$300 max | \$200 max | \$500 max | \$150 max | 100% U&C \$150 max |
| Outpatient Surgery | \$1,500 Max | U&C \$2,000 max | 80% U&C \$2,000 max | 90% U&C \$2,500 max | \$1,500 Max | 75% U&C \$3,750 max |
| Asst. Dr. & Anesthesia | 25% surgeon's allowance | 25% surgeon's allowance | 25% surgeon's allowance | \$500 max each | 25% surgeon's allowance | 25% surgeon's allowance |
| Imaging / X Rays | \$175 max | \$250 max | \$500 max | \$500 max | \$200 max | 100% U&C \$200 max |
| MRI/CAT Scan | \$575 max | \$750 max | Included in Lab | 90% U&C \$1,000 max | \$500 max | 100% U&C \$500 max |
| Doctor Visits | \$40 per visit 10 max | \$50 per visit max 10 | \$40 per day | \$45 per visit | \$40 per visit | \$40 per visit |
| Physical Therapy | \$30 per visit | \$50 per visit | \$40 / visit \$500 | \$35 / visit \$350 | \$25 / visit \$150 | \$20 / visit \$100 |
| | max 5 | max 5 | max | max | max | max |
| Ambulance | \$500 max | \$1,000 max | \$750 max | \$700 max | 1st trip U&C | 1st trip U&C |
| Braces/Ortho Appl | \$500 max | \$500 max | \$400 max | \$500 max | \$500 max | 100% U&C \$300 max |
| Dental | \$500 per injury | \$1,000 per injury | \$1,000 max | \$500 per tooth | \$250 per tooth | 100% U&C \$250 max |
| Prescriptions | \$25 max | \$50 max | \$200 max | \$200 max | 100% U&C | 100% U&C |
| Outpatient Lab | \$50 max | \$100 max | \$300 max | 100% U&C | \$50 max | 100% U&C \$50 max |
| Premium | \$22,400.00 | \$31,950.00 | \$30,235.00 | \$37,275.00 | \$37,080.00 | \$37,350.00 |
| Catastrophic Premium | \$2,062.00 | \$2,062.00 | \$1,427.00 | \$1,559.00 | \$1,427.00 | \$1,704.00 |
| Total Cost | \$24,462.00 | \$34,012.00 | \$31,662.00 | \$38,834.00 | \$38,507.00 | \$39,054.00 |
| School Time Coverage | | \$20.00 | \$42.00 | \$65.00 | | \$64 - \$93 |
| 24 Hour Coverage | | \$90.00 | \$149.00 | \$135.00 | | \$127 - \$195 |
| Recommendation: | <u>1</u> | 2 | 3 | Current Plan | | |