CONNECTICUT MEDICAL PAYMENTS/UNINSURED MOTORISTS SELECTION INFORMED CONSENT FORM NOTICE TO INSUREDS

The Automobile Insurance Reform Act, Public Law 93297, is effective January 1, 1994. It affects your coverage in several ways. This notice describes some of the changes to your coverage and the options that are available to you. If you want to select any of these options, you must fill out this form. Please read this entire form before making any selections.

I. ABOUT THIS FORM

This form provides information about certain coverage options available to you. This form also has charts which show specific information about the coverage rates available to you. Please read the entire form and review the charts. You must indicate your Underinsured and Uninsured Motorist Coverage selections and sign at the end of this form.

II. REPEAL OF NOFAULT

Beginning January 1, 1994, new or renewed policies are not required to include Basic Reparations Benefits (BRB). BRB provided up to \$5,000 for medical expenses and lost wages caused by auto accidents.

You may have other coverage provided by your employer, or by health or disability insurance. If you don't, you should consider BRB-type protection. Otherwise, you may bear the cost yourself. Your options to provide for such losses are shown below.

Of course, if someone else caused your losses, you may seek recovery from that person.

A. OPTIONS TO CONSIDER

Those who need the coverage that is no longer required should consider the following options. You should review your existing coverages and employee benefits to avoid duplicating benefits.

1. Optional Basic or Added Reparations Benefits Coverage

You may choose to buy Basic (BRB) or Added (ARB) Reparations Benefits coverage to help pay your medical bills and lost wages from auto accidents. Basic coverage provides medical, funeral, and wage loss and survivor loss benefits up to a maximum of \$5,000 for all benefits. Additional coverage options are also available (ARB).

2. Optional Medical Payments (MED PAY) Coverage

You may choose to buy Medical Payments coverage to help pay your medical bills from auto accidents. This coverage provides payment for basic medical bills resulting from automobile accident injuries regardless of who is at fault.

III. UNINSURED MOTORIST COVERAGE

A. Types of Coverage

PRAC Auto CT 401 10 01

Ed. 07/06

Our law requires you to buy uninsured motorist (UM/UIM) coverage. Generally, this coverage only applies where the person who causes an accident is not an insured under your policy.

Anyone injured in an accident may seek to recover damages from the person causing the loss. These losses include your medical bills and lost wages (past and future). They may also include payment for disabilities, pain and suffering, and loss of enjoyment of life's activities.

Normally, these damages would be paid by the other person's insurance company. UM/UIM coverage protects you, your family, and others in your car for injuries caused by someone who did not buy insurance.

You have the right to choose the amount of coverage. It can be as low as \$20,000 per person and \$40,000 per accident, or as high as twice your policy's bodily injury liability coverage. The amount of liability coverage you buy will govern the maximum amount of UM/UIM coverage you can buy.

This coverage also includes standard Underinsured Motorist (UIM) coverage. It protects you where injuries are caused by someone whose insurance is not enough to pay your damages and is less than your UM/UIM limits. UIM coverage will pay your damages to fill in the difference between those limits. However, the protection available under standard UIM coverage is usually reduced by amounts paid by worker's compensation, or by or on behalf of the person at fault

Under our new law, you can convert standard UIM coverage to UNDERINSURED MOTORIST CONVERSION (UIMC) coverage. This coverage is not reduced by payments from any source. If your damages exceed the amount of the at fault person's insurance, or other payments, your UIMC coverage will be available for damages not paid.

Both standard (UIM) and conversion (UIMC) coverage only become available after the liability insurance of the at fault person has been fully paid.

B. Stacking

To make a wise decision as to the amount of UM/UIM coverage to buy, you need to understand "stacking." Stacking allowed insureds to add together UM/UIM coverage under separate policies or, in multicar policies, the insurance applicable to each car.

Unless you agreed to nonstacked coverage, all policies in effect before January 1, 1994, provide for stacking. Policies issued or renewed beginning in 1994 will no longer provide for stacking.

With stacking, if you had two insured cars and you purchased \$100,000 of UM/UIM coverage, you received (and you paid for) \$200,000 of protection. Under the new law, the purchased amount (\$100,000) would not be multiplied by the number of cars insured.

Also, your UM/UIM coverage will be limited to the highest available limit under any of the policies that apply to the accident. If you are injured in a car you own, you are limited to the amount of coverage for that car.

C. To Make Your Selections

The charts on page 3 show the Uninsured and Underinsured Motorist Coverage selections you can make. Your agent will tell you which group you belong to. If you want to select any of the options in this form, indicate your selections and sign at the end of this form.

Uninsured/Underinsured Motorist Coverage Rate Options

1. Combined Single Limits

	Single Car, Standard	Single Car, Conversion
Limit	Premium	Premium
\$100,000	\$	\$
\$200,000	\$	\$
\$300,000	\$	\$
\$500,000	\$	\$
\$600,000	\$	\$
\$1,000,000	\$	\$

2. Split Limits

	Single Car, Standard	Single Car, Conversion
Limit	Premium	Premium
20/40	\$	\$
25/50	\$	\$
40/80	\$	\$
50/100	\$	\$
100/200	\$	\$
100/300	\$	\$
200/600	\$	\$
250/500	\$	\$
500/1000	\$	\$

WHEN YOU SIGN THIS FORM, YOU ARE CHOOSING A REDUCED PREMIUM, BUT YOU ARE ALSO CHOOSING NOT TO PURCHASE CERTAIN VALUABLE COVERAGE WHICH PROTECTS YOU AND YOUR FAMILY. IF YOU ARE UNCERTAIN ABOUT HOW THIS DECISION WILL AFFECT YOU, YOU SHOULD GET ADVICE FROM YOUR INSURANCE AGENT OR ANOTHER QUALIFIED ADVISOR.

I select UM/UIM limits as shown on page 4 of this form. I understand that these limits will apply to all future renewals, reinstatements, and changes in my policy unless I notify Plymouth Rock Assurance Corporation otherwise in writing. The uninsured and underinsured motorists limits selected apply to all autos presently on my policy and any I may add in the future.

To Be Filled Out by the Plymouth Rock Agent Policy#				
Limits Selected				

To Be Filled Out by the Insured		
Insured Signature	Date	