



**Plans of Insurance for the
Michigan Fire Service Instructors Association**
Benefits apply while performing a Covered Activity.

Class 1: All volunteer classes of membership including but not limited to a Volunteer Member, Emergency Volunteer, Auxiliary Member, Fire Corps, Community Volunteer, Board Member, Trustee, Administrative Personnel, Junior Member, Member in Training, Probationary Member, and Part-Time Employees (Policyholder).

Section I: Death Benefits		Plan 3
A.	Covered Injury Death Benefit	\$25,000
B.	Covered Illness Death Benefit	\$25,000
C.	HIV Positive Diagnosis Lump Sum Benefit	\$25,000
D.	Bereavement Benefit	Up to \$2,500
E.	Dependent Child Benefit (Per Child)	Up to \$10,000
F.	Seat Belt Benefit	\$6,250
	Airbag Benefit	\$6,250
G.	Final Expenses Benefit	Up to \$2,500
H.	Spousal Benefit	\$15,000

Section II: Impairment Benefits		
A.	Dismemberment, Loss of Speech or Hearing Benefit*	Up to \$25,000
B.	Vision Impairment Benefit*	Up to \$25,000
C.	Cosmetic Disfigurement from Burns Benefit*	Up to \$25,000
D.	Permanent Physical Impairment Benefit*	Up to \$25,000
E.	Felonious Assault Benefit	Up to \$12,500
F.	Impairment Modification Benefit*	Up to \$50,000
G.	Paralysis Benefit*	Up to \$25,000

* Benefits payable are based on the percentage of impairment or loss as defined in the Policy.

Section III: Income Protection Benefits		
A.	Weekly Total Disability Benefits	Up to \$300
A.i.	Covered Injury Minimum Weekly Total Disability Benefit	\$50
A.ii.	Covered Illness Minimum Weekly Total Disability Benefit	\$50
A.iii.	Covered Injury Weekly Earned Income Replacement Benefit**	Up to \$250
A.iv.	Covered Illness Weekly Earned Income Replacement Benefit**	Up to \$250
B.	Partial Disability Benefit **	Up to \$300
C.	Cost of Living Adjustment	Up to \$900
D.	First Week Disability Benefit**	Up to \$1,000
E.	Transition Benefit	Up to \$300
F.	Retraining Benefit	Up to \$20,000

** Benefits are payable in coordination with the Loss of Earnings Coverage as defined in the Policy.

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Section IV: Medical Expenses		Plan 3
A.	Medical Expense Benefit	Up to \$5,000
B.	Plastic Surgery Expense Benefit	Up to \$25,000

Section V: Additional Benefits		
A.	Daily Hospital Confinement and Outpatient Treatment Benefit	\$5
B.	Daily Critical Care Benefit	\$10
C.	Family Expense Benefit	Up to \$5,000
D.	Occupational Rehabilitation Benefit	Up to \$5,000
E.	Mental Stress Management Benefit	Up to \$5,000
F.	Traumatic Incident Benefit	Up to \$2,500
G.	Health Insurance Premium Benefit	Up to \$12,000
H.	Surviving Spouse Education Benefit	Up to \$10,000
I.	Dependent Child Education Benefit	Up to \$10,000