



REQUEST FOR QUOTE FOR 2017 Qtr 3 GIT RATES & Plans!

The Group Insurance Trust (GIT) Medical Insurance Program rates are guaranteed for one year from effective date.

The 2017 rates are now available for Qtr 3. The GIT has provided dealers with a strong choice for their medical coverage for over 67 years. The GIT medical and high deductible plans are underwritten by Blue Shield of Northeastern NY and Excellus BlueCross BlueShield, and are available to dealers throughout New York State and for any insurable entities outside New York.

If you are enrolled in a different health insurance program, and want to be sure that you are getting the best possible selection and cost available, now is the time to start the process of getting a quote. Just a few minutes of your time could result in savings to you and your employees. In a business climate where every dollar counts, don't let inertia keep you from realizing a savings in this area of your operation.

A Few Reasons To Consider The GIT For Your Medical, Dental and NYS Disability:

- All GIT health plans are Health Care Reform compliant
- GIT offers it's own Bronze plan outside the NYS Health Exchange
- Quarterly Rates—Guaranteed For 1 Year (Enroll at Any Time For 1 Year)
- Plans Are Designed And Underwritten by Blue Shield of NENY and Excellus BlueCross BlueShield
- Can Insure Dealers In New York State, and in all other States Through Its BlueCross BlueShield Plans
- Large Dealer Group Experience Rating Done & Alternate Fund Rating Available With Benefit of GIT
- 1 PPO; 3 EPO's and 2 High Deductible Plans, and a Bronze Plan
- 10 Different Prescription Plans To Choose To Match With Your Medical (Only) Plans Selected
- 2 Dental Plans To Choose From and Pediatric Dental Administered By Guardian
- NYS Disability, Rates Remain Unchanged For 2017 (Same Rate for Male/Female/Month)

For more information regarding GIT Plans and Rates, please contact, or have your broker contact Jeff Scardino, Insurance Director at 518-463-1148, ext. 321, or jeff@nysada.com

Yes, I would like to receive a quote for my dealership's health and other insurance benefits. Please have someone contact me for the necessary information needed to generate a quote.

Dealership: _____ Phone: _____ Email: _____

Address: _____

Contact: _____ Current health insurance carrier: _____

My current health plan renews as of: _____ County: _____

Fax to NYSADA at 518-434-1757 or email to jeff@nysada.com