

\* \* \* \* \*

Petitioners,

V.

SECRETARY OF HEALTH AND  
HUMAN SERVICES

Respondent.

No. 06-0120V  
Filed: June 28, 2010

**NOT TO BE PUBLISHED**

## DECISION<sup>1</sup>

On July 30, 2008, Special Master Richard B. Abell filed a Ruling concluding that the petitioners, Erin Zeller and Benjamin S. Zeller, are entitled to an award in this case, pursuant to the National Childhood Vaccine Injury Act of 1986, as amended ("the Vaccine Act"), on behalf of their son, Benjamin J. Zeller. 42 U.S.C. § 300aa-10 et seq. This case was transferred to me on February 25, 2010. On June 8, 2010, respondent filed "Respondent's Proffer on Damages," with an attached Appendix A. On June 10, 2010, petitioners' counsel, Ronald Homer, confirmed to my staff by telephone that petitioners accept that Proffer as a reasonable measure of the amount of the award appropriate in this case.

I have reviewed respondent's Proffer and Appendix A, and find that they define appropriate compensation in this case pursuant to 42 U.S.C. § 300aa-15(b). I conclude that compensation should be awarded based on those documents. (I have attached Appendix A to this Decision.) I order that respondent make lump sum payments and purchase an annuity contract as described below.

<sup>1</sup>This document constitutes my final “decision” in this case, pursuant to 42 U.S.C. § 300aa-12(d)(3)(A). Unless a motion for review of this decision is filed within 30 days, the Clerk of this Court shall enter judgment in accord with this decision.

## ***1. Lump Sums***

- a. A lump sum payment in the amount of \$1,129,975.21, which represents compensation for lost future earnings (\$643,903.00), pain and suffering (\$235,000.00), and life care expenses for Year One (\$251,072.21), shall be made payable to Benjamin S. Zeller, as guardian/conservator of the estate of Benjamin J. Zeller.<sup>2</sup>
- b. A lump sum payment in the amount of \$41,523.00, which represents past unreimbursed expenses, shall be made payable jointly to Erin Zeller and Benjamin S. Zeller.
- c. A lump sum payment in the amount of \$155,269.38, which represents reimbursement for the state's Medicaid lien, shall be payable to Benjamin S. Zeller (as guardian/conservator of the estate of Benjamin J. Zeller) and ACS Recovery Services (Florida Agency for Health Care Administration, Medicaid Third Party Liability Program, P.O. Box 12188, Tallahassee, FL 32317-2188, Attn: Nika Ervin).

## ***2. Annuity***

I consider it in Benjamin J. Zeller's best interest that the compensation for life care items awarded beyond Year One post-judgment be paid in the form of an annuity, which annuity shall be purchased as soon as practicable after entry of judgment. Accordingly, pursuant to 42 U.S.C. § 300aa-15(f)(4), I order respondent to purchase, and take ownership of, an annuity contract from an insurance company<sup>3</sup> for the benefit of Benjamin, pursuant to which the insurance company will agree to make periodic payments for the rest of Benjamin's life, commencing on the first anniversary of the date of judgment and terminating upon Benjamin's death. The amount of the annuity payments in each year will be calculated based on Appendix A, supplied by respondent, which I have attached to this Decision.

The annuity company must meet the following criteria:

- 1) has a minimum of \$250,000,000 of capital and surplus, exclusive of any mandatory security valuation reserve; and

---

<sup>2</sup>On December 16, 2009, petitioners filed papers notifying the court that the petitioner, Benjamin S. Zeller, was appointed sole guardian of Benjamin J. Zeller's estate by an order issued in the probate Court for the Circuit Court of Palm Beach County on December 9, 2009. Accordingly, any payments that are required to be paid to the guardian/conservator of Benjamin J. Zeller should be made payable to Benjamin S. Zeller as guardian/conservator of the estate of Benjamin J. Zeller, for as long as he remains duly appointed guardian/conservator. However, if Benjamin S. Zeller is later removed or otherwise not authorized by a court of competent jurisdiction to serve as guardian/conservator of the estate of Benjamin J. Zeller, any such payment shall be paid to the party or parties appointed by a court of competent jurisdiction to serve as guardian/conservator of the estate of Benjamin J. Zeller upon submission of written documentation of such appointment to the Secretary.

<sup>3</sup>To satisfy the conditions set forth herein, in respondent's discretion, respondent may purchase one or more annuity contracts from one or more life insurance companies.

- 2) has one of the following ratings from two of the following rating organizations:
- a) A.M. Best Company: A++, A+, A+g, A+p, A+r or A+s;
  - b) Moody's Investors Service Claims Paying Rating: Aa3, Aa2, Aa1 or Aaa;
  - c) Standard and Poor's Corporation Insurer Claims-Paying Ability Rating: AA-, AA, AA+ or AAA;
  - d) Fitch Credit Rating Company, Insurance Company Claims Paying Ability Rating: AA-, AA, AA+ or AAA.

### **CONCLUSION**

Petitioners, as legal representatives of Benjamin J. Zeller, are entitled to an award under the Vaccine Act to provide for compensation for Benjamin's injury. The award shall be partly in the form of an annuity, and partly in the form of lump sum payments, as provided above.

In the absence of a motion for review filed pursuant to RCFC, Appendix B, the clerk is directed to enter judgment in accord with this Decision.

**IT IS SO ORDERED.**

/s/ George L. Hastings, Jr  
George L. Hastings, Jr.  
Special Master

Zeller *et. al.* v. Secretary, HHS, Case No. 06-120

## Appendix A

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 1 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	CMS Title 21 Insurance 5%	Cover FL Healthcare 5%	Medicare Part B Premium 5%	Medicare Part B Deductible 5%	Medicare Part A Deductible 5%	Medigap 5%	Medicare Part D 5%	Labs- CBC, Chest X-rays, MRI 5% *	Pediatrician 5% *	Pediatric Neurologist 5% *
			M	M	M			M	M			M
2010	0	7	1,536.00							1,072.58	1,200.00	4,518.00
2011	1	8	1,536.00							1,072.58	1,200.00	4,518.00
2012	2	9	1,536.00							1,072.58	1,200.00	4,518.00
2013	3	10	1,536.00							1,072.58	1,200.00	4,518.00
2014	4	11	1,536.00							1,072.58	1,200.00	4,518.00
2015	5	12	1,536.00							1,072.58	1,200.00	4,518.00
2016	6	13	1,536.00							1,072.58	1,200.00	4,518.00
2017	7	14	1,536.00							1,072.58	1,200.00	4,518.00
2018	8	15	1,536.00							1,072.58	1,200.00	4,518.00
2019	9	16	1,536.00							1,072.58	600.00	2,259.00
2020	10	17	1,536.00							1,072.58	600.00	2,259.00
2021	11	18	1,536.00							1,072.58	600.00	2,259.00
2022	12	19		1,676.16						1,072.58	600.00	2,259.00
2023	13	20		1,676.16						1,072.58		
2024	14	21		1,676.16						1,072.58		
2025	15	22		1,676.16						1,072.58		
2026	16	23		1,676.16						1,072.58		
2027	17	24		1,676.16						1,072.58		
2028	18	25		1,676.16						1,072.58		
2029	19	26		1,676.16						1,072.58		
2030	20	27		1,676.16						1,072.58		
2031	21	28		1,676.16						1,072.58		
2032	22	29		1,676.16						1,072.58		
2033	23	30		1,943.76						1,072.58		
2034	24	31		1,943.76						1,072.58		
2035	25	32		1,943.76						1,072.58		
2036	26	33		1,943.76						1,072.58		
2037	27	34		1,943.76						1,072.58		
2038	28	35		1,943.76						1,072.58		
2039	29	36		1,943.76						1,072.58		
2040	30	37		1,943.76						1,072.58		

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 2 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	CMS Title 21 Insurance 5%	Cover FL Healthcare 5%	Medicare Part B Premium 5%	Medicare Part B Deductible 5%	Medicare Part A Deductible 5%	Medigap 5%	Medicare Part D 5%	Labs- CBC, Chest X-rays, MRI 5% *	Pediatrician 5% *	Pediatric Neurologist 5% *
			M	M	M			M	M			M
2041	31	38		1,943.76						1,072.58		
2042	32	39		1,943.76						1,072.58		
2043	33	40		2,552.40						1,072.58		
2044	34	41		2,552.40						1,072.58		
2045	35	42		2,552.40						1,072.58		
2046	36	43		2,552.40						1,072.58		
2047	37	44		2,552.40						1,072.58		
2048	38	45		2,552.40						1,072.58		
2049	39	46		2,552.40						1,072.58		
2050	40	47		2,552.40						1,072.58		
2051	41	48		2,552.40						1,072.58		
2052	42	49		2,552.40						1,072.58		
2053	43	50		2,552.40						1,072.58		
2054	44	51			1,326.00	155.00	1,100.00		9,203.97			
2055	45	52			1,326.00	155.00	1,100.00		9,203.97			
2056	46	53			1,326.00	155.00	1,100.00		9,203.97			
2057	47	54			1,326.00	155.00	1,100.00		9,203.97			
2058	48	55			1,326.00	155.00	1,100.00		9,203.97			
2059	49	56			1,326.00	155.00	1,100.00		9,203.97			
2060	50	57			1,326.00	155.00	1,100.00		9,203.97			
2061	51	58			1,326.00	155.00	1,100.00		9,203.97			
2062	52	59			1,326.00	155.00	1,100.00		9,203.97			
2063	53	60			1,326.00	155.00	1,100.00		9,203.97			
2064	54	61			1,326.00	155.00	1,100.00		9,203.97			
2065	55	62			1,326.00	155.00	1,100.00		9,203.97			
2066	56	63			1,326.00	155.00	1,100.00		9,203.97			
2067	57	64			1,326.00	155.00	1,100.00		9,203.97			
2068	58	65			1,326.00			2,499.00	9,203.97			
2069	59	66			1,326.00			2,499.00	9,203.97			
2070	60	67			1,326.00			2,499.00	9,203.97			

Continuing for Life

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 3 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Neurologist 5% *	Hospital- izations 5% *	ER Visits 5% *	Dentist w/ Anesthesia 5% *	Topamax 5% *	Diazepam 5% *	Albuterol 5% *	Lamictal 5% *	TLSO Back Brace 4% *	Benik Vest 4% *
							M	M	M	M		
2010	0	7		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2011	1	8		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2012	2	9		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2013	3	10		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2014	4	11		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2015	5	12		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2016	6	13		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2017	7	14		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2018	8	15		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2019	9	16		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2020	10	17		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2021	11	18		7,273.00	1,150.00	2,000.00	60.00	60.00	60.00	60.00		
2022	12	19		7,273.00	1,150.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2023	13	20	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2024	14	21	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2025	15	22	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2026	16	23	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2027	17	24	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2028	18	25	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2029	19	26	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2030	20	27	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2031	21	28	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2032	22	29	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2033	23	30	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2034	24	31	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2035	25	32	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2036	26	33	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2037	27	34	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2038	28	35	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2039	29	36	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2040	30	37	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 4 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Neurologist 5% *	Hospital- izations 5% *	ER Visits 5% *	Dentist w/ Anesthesia 5% *	Topamax 5% *	Diazepam 5% *	Albuterol 5% *	Lamictal 5% *	TLSO Back Brace 4% *	Benik Vest 4% *
							M	M	M	M		
2041	31	38	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2042	32	39	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2043	33	40	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2044	34	41	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2045	35	42	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2046	36	43	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2047	37	44	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2048	38	45	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2049	39	46	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2050	40	47	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2051	41	48	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2052	42	49	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61	2,280.00	466.21
2053	43	50	200.00	1,750.00	250.00	2,000.00	8,562.00	119.64	552.00	2,792.61		
2054	44	51	305.60		95.00	400.00					456.00	93.24
2055	45	52	305.60		95.00	400.00					228.00	46.62
2056	46	53	305.60		95.00	400.00					228.00	46.62
2057	47	54	305.60		95.00	400.00					228.00	46.62
2058	48	55	305.60		95.00	400.00					228.00	46.62
2059	49	56	305.60		95.00	400.00					228.00	46.62
2060	50	57	305.60		95.00	400.00					228.00	46.62
2061	51	58	305.60		95.00	400.00					228.00	46.62
2062	52	59	305.60		95.00	400.00					228.00	46.62
2063	53	60	305.60		95.00	400.00					228.00	46.62
2064	54	61	305.60		95.00	400.00					228.00	46.62
2065	55	62	305.60		95.00	400.00					228.00	46.62
2066	56	63	305.60		95.00	400.00					228.00	46.62
2067	57	64	305.60		95.00	400.00					228.00	46.62
2068	58	65										
2069	59	66										
2070	60	67										

Continuing for Life



5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 5 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Bilateral AFO/SMOs 4% *	Benik Hand Splints 4% *	Bilateral Elbow Mobilizers 4% *	Custom Wrist Hand Splints 4% *	Bilateral Hip/ Femur Orthosis 4% *	PT 4% *	OT 4% *	ST 4% *	Aqua Therapy 4%	Therapeutic Riding 4%
								M	M	M		
2010	0	7						12,500.00	6,250.00	12,500.00	1,073.00	430.00
2011	1	8						12,500.00	6,250.00	12,500.00	948.00	430.00
2012	2	9						12,500.00	6,250.00	12,500.00	948.00	430.00
2013	3	10						12,500.00	6,250.00	12,500.00	948.00	430.00
2014	4	11						12,500.00	6,250.00	12,500.00	948.00	430.00
2015	5	12						12,500.00	6,250.00	12,500.00	948.00	430.00
2016	6	13						12,500.00	6,250.00	12,500.00	948.00	430.00
2017	7	14						6,000.00	1,500.00	1,500.00	948.00	430.00
2018	8	15						6,000.00	1,500.00	1,500.00	948.00	430.00
2019	9	16						6,000.00	1,500.00	1,500.00	948.00	430.00
2020	10	17						6,000.00	1,500.00	1,500.00	948.00	430.00
2021	11	18						6,000.00	1,500.00	1,500.00	948.00	430.00
2022	12	19	2,913.46	790.68	254.56	466.00	2,514.90	6,000.00	1,500.00	1,500.00	948.00	430.00
2023	13	20		790.68	254.56	466.00		6,000.00	1,500.00		948.00	430.00
2024	14	21	2,913.46	790.68	254.56	466.00	2,514.90	6,000.00	1,500.00		948.00	430.00
2025	15	22		790.68	254.56	466.00		1,500.00	375.00			
2026	16	23	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2027	17	24		790.68	254.56	466.00		1,500.00	375.00			
2028	18	25	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2029	19	26		790.68	254.56	466.00		1,500.00	375.00			
2030	20	27	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2031	21	28		790.68	254.56	466.00		1,500.00	375.00			
2032	22	29	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2033	23	30		790.68	254.56	466.00		1,500.00	375.00			
2034	24	31	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2035	25	32		790.68	254.56	466.00		1,500.00	375.00			
2036	26	33	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2037	27	34		790.68	254.56	466.00		1,500.00	375.00			
2038	28	35	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2039	29	36		790.68	254.56	466.00		1,500.00	375.00			
2040	30	37	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 6 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Bilateral AFO/SMOs 4% *	Benik Hand Splints 4% *	Bilateral Elbow Mobilizers 4% *	Custom Wrist Hand Splints 4% *	Bilateral Hip/ Femur Orthosis 4% *	PT 4% *	OT 4% *	ST 4% *	Aqua Therapy 4%	Therapeutic Riding 4%
								M	M	M		
2041	31	38		790.68	254.56	466.00		1,500.00	375.00			
2042	32	39	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2043	33	40		790.68	254.56	466.00		1,500.00	375.00			
2044	34	41	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2045	35	42		790.68	254.56	466.00		1,500.00	375.00			
2046	36	43	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2047	37	44		790.68	254.56	466.00		1,500.00	375.00			
2048	38	45	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2049	39	46		790.68	254.56	466.00		1,500.00	375.00			
2050	40	47	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2051	41	48		790.68	254.56	466.00		1,500.00	375.00			
2052	42	49	2,913.46	790.68	254.56	466.00	2,514.90	1,500.00	375.00			
2053	43	50		790.68	254.56	466.00		1,500.00	375.00			
2054	44	51	582.69	158.14	50.91	93.20	502.98	300.00	75.00			
2055	45	52	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2056	46	53	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2057	47	54	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2058	48	55	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2059	49	56	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2060	50	57	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2061	51	58	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2062	52	59	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2063	53	60	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2064	54	61	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2065	55	62	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2066	56	63	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2067	57	64	291.35	158.14	50.91	93.20	251.49	300.00	75.00			
2068	58	65										
2069	59	66										
2070	60	67										

Continuing for Life

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 7 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Special Needs Camp 4%	Sensory Motor Equip. 4%	Side Lyr 4% *	Prone Stander 4% *	Rifton Advancement Chair 4% *	Juvenile and Adult Leckey Bath Seat 4% *	Hoyer Lift 4% *	Bed Rails & Bed 4%	Tumble Forms Vestibular System 4%
2010	0	7	1,000.00	350.00	482.95	1,651.50	1,928.70	436.95	839.00	94.95	3,549.95
2011	1	8	1,000.00	175.00							
2012	2	9	1,000.00	175.00							
2013	3	10	1,000.00	175.00				436.95			
2014	4	11	1,000.00	175.00							
2015	5	12	1,000.00	175.00	482.95		1,928.70				
2016	6	13	1,000.00	175.00				436.95		1,800.00	
2017	7	14	1,000.00	175.00							
2018	8	15	1,000.00	175.00							
2019	9	16	1,000.00	175.00				502.95			
2020	10	17		175.00	482.95	1,858.50	1,928.70		839.00		
2021	11	18		175.00							
2022	12	19		175.00				502.95			
2023	13	20		175.00							
2024	14	21		175.00							
2025	15	22					1,928.70				
2026	16	23									
2027	17	24									
2028	18	25				1,858.50					
2029	19	26									
2030	20	27					1,928.70				
2031	21	28									
2032	22	29									
2033	23	30									
2034	24	31									
2035	25	32					1,928.70				
2036	26	33									
2037	27	34									
2038	28	35				1,858.50					
2039	29	36									
2040	30	37					1,928.70				

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

[illegible]

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 9 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Nosey Cup, Adaptive Equip., etc. 4%	Positioning Wedges 4%	Pediatric WC 4%	Adult WC 4% *	Accessible Van 4%	Lift Maint 4%	Home Mods 4%	Home Health and Respite 4%	Weekend Care 4%
										M	M
2010	0	7	500.00	217.95	3,678.00		46,500.00	500.00	69,500.00	40,350.00	7,980.00
2011	1	8	100.00					250.00		40,350.00	7,980.00
2012	2	9	100.00		3,678.00			250.00		40,350.00	7,980.00
2013	3	10	100.00					250.00		40,350.00	7,980.00
2014	4	11	100.00		3,678.00			250.00		40,350.00	7,980.00
2015	5	12	100.00	217.95				250.00		40,350.00	7,980.00
2016	6	13	100.00		3,678.00			250.00		40,350.00	7,980.00
2017	7	14	100.00					250.00		40,350.00	7,980.00
2018	8	15	100.00		3,678.00			250.00		40,350.00	7,980.00
2019	9	16	100.00					250.00		40,350.00	7,980.00
2020	10	17	100.00	217.95		4,195.00	37,200.00	250.00		40,350.00	7,980.00
2021	11	18	100.00					250.00			
2022	12	19	100.00					250.00			
2023	13	20	100.00					250.00			
2024	14	21	100.00					250.00			
2025	15	22	100.00	217.95		4,195.00					
2026	16	23	100.00								
2027	17	24	100.00								
2028	18	25	100.00								
2029	19	26	100.00								
2030	20	27	100.00	217.95		4,195.00					
2031	21	28	100.00								
2032	22	29	100.00								
2033	23	30	100.00								
2034	24	31	100.00								
2035	25	32	100.00	217.95		4,195.00					
2036	26	33	100.00								
2037	27	34	100.00								
2038	28	35	100.00								
2039	29	36	100.00								
2040	30	37	100.00	217.95		4,195.00					

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Nosey Cup, Adaptive Equip., etc. 4%	Positioning Wedges 4%	Pediatric WC 4%	Adult WC 4% *	Accessible Van 4%	Lift Maint 4%	Home Mods 4%	Home Health and Respite 4%	Weekend Care 4%
										M	M
2041	31	38	100.00								
2042	32	39	100.00								
2043	33	40	100.00								
2044	34	41	100.00								
2045	35	42	100.00	217.95		4,195.00					
2046	36	43	100.00								
2047	37	44	100.00								
2048	38	45	100.00								
2049	39	46	100.00								
2050	40	47	100.00	217.95		4,195.00					
2051	41	48	100.00	43.59							
2052	42	49	100.00	43.59							
2053	43	50	100.00	43.59							
2054	44	51	100.00	43.59							
2055	45	52	100.00	43.59		839.00					
2056	46	53	100.00	43.59		167.80					
2057	47	54	100.00	43.59		167.80					
2058	48	55	100.00	43.59		167.80					
2059	49	56	100.00	43.59		167.80					
2060	50	57	100.00	43.59		167.80					
2061	51	58	100.00	43.59		167.80					
2062	52	59	100.00	43.59		167.80					
2063	53	60	100.00	43.59		167.80					
2064	54	61	100.00	43.59		167.80					
2065	55	62	100.00	43.59		167.80					
2066	56	63	100.00	43.59		167.80					
2067	57	64	100.00	43.59		167.80					
2068	58	65	100.00	43.59							
2069	59	66	100.00	43.59							
2070	60	67	100.00	43.59							
Continuing for Life											

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 11 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Home Health and Respite ages 18-21 (Corrected) 4%	ICF Group Home 4%	Day Treatment Program 4%	Diapers 4%	Wipes, Gloves, etc. 4%	Wound Care/ Cool Gel, Topical Cream 4%	Case Mngt 4%	Miami Children's Hospital - Ketogenic Diet 0%	Neurologist Fees 0%	Ketogenic Diet Follow Up Visits 5%
			M	M	M	M	M		M			
2010	0	7				1,039.73	667.95	200.00	5,340.00	10,200.00	690.00	1,160.00
2011	1	8				1,039.73	667.95	200.00	2,136.00			1,160.00
2012	2	9				1,039.73	667.95	200.00	2,136.00			1,160.00
2013	3	10				1,039.73	667.95	200.00	2,136.00			1,160.00
2014	4	11				1,039.73	667.95	200.00	2,136.00			1,160.00
2015	5	12				1,039.73	667.95	200.00	2,136.00			
2016	6	13				1,039.73	667.95	200.00	2,136.00			
2017	7	14				1,039.73	667.95	200.00	2,136.00			
2018	8	15				1,039.73	667.95	200.00	2,136.00			
2019	9	16				1,039.73	667.95	200.00	2,136.00			
2020	10	17				1,039.73	667.95	200.00	2,136.00			
2021	11	18	87,600.00			1,039.73	667.95	200.00	2,136.00			
2022	12	19	87,600.00			1,039.73	667.95	200.00	2,136.00			
2023	13	20	87,600.00			1,039.73	667.95	200.00	2,136.00			
2024	14	21	87,600.00			1,039.73	667.95	200.00	2,136.00			
2025	15	22		127,750.00	16,200.00				2,136.00			
2026	16	23		127,750.00	16,200.00							
2027	17	24		127,750.00	16,200.00							
2028	18	25		127,750.00	16,200.00							
2029	19	26		127,750.00	16,200.00							
2030	20	27		127,750.00	16,200.00							
2031	21	28		127,750.00	16,200.00							
2032	22	29		127,750.00	16,200.00							
2033	23	30		127,750.00	16,200.00							
2034	24	31		127,750.00	16,200.00							
2035	25	32		127,750.00	16,200.00							
2036	26	33		127,750.00	16,200.00							
2037	27	34		127,750.00	16,200.00							
2038	28	35		127,750.00	16,200.00							
2039	29	36		127,750.00	16,200.00							
2040	30	37		127,750.00	16,200.00							

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 12 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Home Health and Respite ages 18-21 (Corrected) 4%	ICF Group Home 4%	Day Treatment Program 4%	Diapers 4%	Wipes, Gloves, etc. 4%	Wound Care/ Cool Gel, Topical Cream 4%	Case Mngt 4%	Miami Children's Hospital - Ketogenic Diet 0%	Neurologist Fees 0%	Ketogenic Diet Follow Up Visits 5%
			M	M	M	M	M		M			
2041	31	38		127,750.00	16,200.00							
2042	32	39		127,750.00	16,200.00							
2043	33	40		127,750.00	16,200.00							
2044	34	41		127,750.00	16,200.00							
2045	35	42		127,750.00	16,200.00							
2046	36	43		127,750.00	16,200.00							
2047	37	44		127,750.00	16,200.00							
2048	38	45		127,750.00	16,200.00							
2049	39	46		127,750.00	16,200.00							
2050	40	47		127,750.00	16,200.00							
2051	41	48		127,750.00	16,200.00							
2052	42	49		127,750.00	16,200.00							
2053	43	50		127,750.00	16,200.00							
2054	44	51		127,750.00	16,200.00							
2055	45	52		127,750.00	16,200.00							
2056	46	53		127,750.00	16,200.00							
2057	47	54		127,750.00	16,200.00							
2058	48	55		127,750.00	16,200.00							
2059	49	56		127,750.00	16,200.00							
2060	50	57		127,750.00	16,200.00							
2061	51	58		127,750.00	16,200.00							
2062	52	59		127,750.00	16,200.00							
2063	53	60		127,750.00	16,200.00							
2064	54	61		127,750.00	16,200.00							
2065	55	62		127,750.00	16,200.00							
2066	56	63		127,750.00	16,200.00							
2067	57	64		127,750.00	16,200.00							
2068	58	65		127,750.00	16,200.00							
2069	59	66		127,750.00	16,200.00							
2070	60	67		127,750.00	16,200.00							

Continuing for Life



5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 13 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life  
Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Ketogenic Diet - EKG, Lab, Cardiologist 5%	Annual Total
2010	0	7	472.00	251,072.21
2011	1	8	472.00	107,148.26
2012	2	9	472.00	110,826.26
2013	3	10	472.00	107,585.21
2014	4	11	472.00	110,826.26
2015	5	12		108,145.86
2016	6	13		111,431.21
2017	7	14		83,266.26
2018	8	15		86,944.26
2019	9	16		80,910.21
2020	10	17		126,129.36
2021	11	18		118,677.26
2022	12	19		140,792.43
2023	13	20		121,532.91
2024	14	21		129,707.48
2025	15	22		174,888.88
2026	16	23		174,585.80
2027	17	24		166,411.23
2028	18	25		176,444.30
2029	19	26		166,411.23
2030	20	27		180,927.45
2031	21	28		166,411.23
2032	22	29		174,585.80
2033	23	30		166,678.83
2034	24	31		174,853.40
2035	25	32		173,020.48
2036	26	33		174,853.40
2037	27	34		166,678.83
2038	28	35		176,711.90
2039	29	36		166,678.83
2040	30	37		181,195.05

5/7/2010

## APPENDIX A: LIFE CARE ITEMS OF COMPENSATION FOR BENJAMIN J. ZELLER

Page 14 of 14

Petitioner: Benjamin Zeller, D.O.B. 11/06/2003

Year 1 LCP Cash: \$251,072.21

Annual Amounts Follow Anniversary Dates of Judgment

and to be Increased at the Rates Indicated, Compounded Annually

Note: Asterisk (\*) Indicates Insurance and/or Medicare/Medigap Offsets Applied

Offsets assumed: FL CMS 2010-2021; Cover FL Ins 2022-2053; Medicare 2054-2067; Medicare/Medigap 2068-Life

Items Denoted with an "M" Payable in 12 Monthly Installments Totaling Annual Amounts Provided

Year	Year from Judgment	Age	Ketogenic Diet - EKG, Lab, Cardiologist 5%	Annual Total
2041	31	38		166,678.83
2042	32	39		174,853.40
2043	33	40		167,287.47
2044	34	41		175,462.04
2045	35	42		173,629.12
2046	36	43		175,462.04
2047	37	44		167,287.47
2048	38	45		175,462.04
2049	39	46		167,287.47
2050	40	47		181,803.69
2051	41	48		167,716.80
2052	42	49		175,891.37
2053	43	50		167,716.80
2054	44	51		159,377.06
2055	45	52		159,398.61
2056	46	53		158,727.41
2057	47	54		158,727.41
2058	48	55		159,099.11
2059	49	56		158,727.41
2060	50	57		158,727.41
2061	51	58		158,727.41
2062	52	59		158,727.41
2063	53	60		158,727.41
2064	54	61		158,727.41
2065	55	62		158,727.41
2066	56	63		158,727.41
2067	57	64		158,727.41
2068	58	65		157,508.30
2069	59	66		157,508.30
2070	60	67		157,508.30
Continuing for Life				