



2017 Rate Renewal Exclusively for

North Central Area Schools

Renewal Effective 07/01/2017

Quote #: 337300
 MESSA Field Rep: RaeAnn Loy
 Date Created: 03/17/2017

Good health. Good business. Great schools.
 1475 Kendale Boulevard, PO Box 2560
 East Lansing, MI 48826-2560
 800.292.4910

| NON-PAK - 584A Support Staff | | 2016-17 Rates without Taxes | Enrollment | 2017-18 Rates without Taxes | 2017-18 Rates with Taxes |
|-------------------------------------|-------------------------|--|-------------------|--|-------------------------------------|
| Medical: | MESSA ABC Plan 1 | \$585.73 | Single: 0 | \$671.41 | \$685.88 |
| IN Deductible: | \$1300 1P; \$2600 2P&FF | \$1,316.02 | 2-Person: 0 | \$1,508.80 | \$1,541.36 |
| IN Coinsurance: | N/A | \$1,637.34 | Family: 0 | \$1,877.25 | \$1,917.77 |
| IN Copay (OV/UC/ER): | N/A | | | | |
| Rx Coverage: | ABC Rx | | | | |
| Riders Included: | None | | | | |
| Medical: | MESSA Choices | \$650.65 | Single: 6 | \$751.86 | \$768.07 |
| IN Deductible: | \$500/\$1000 | \$1,462.08 | 2-Person: 4 | \$1,689.80 | \$1,726.27 |
| IN Coinsurance: | N/A | \$1,819.11 | Family: 6 | \$2,102.49 | \$2,147.87 |
| IN Copay (OV/UC/ER): | \$20/\$25/\$50 | | | | |
| Rx Coverage: | Saver Rx | | | | |
| Riders Included: | None | | | | |
| Dental: | | \$16.25 | Single: 6 | \$15.24 | \$15.51 |
| Class I: | 50% | \$32.95 | 2-Person: 6 | \$31.42 | \$31.98 |
| Class II: | 50% | \$64.11 | Family: 7 | \$63.15 | \$64.28 |
| Class III: | 50% | | | | |
| Annual Max: | \$1,000 | | | | |
| Class IV: | 50% | | | | |
| Lifetime Max: | \$1,500 | | | | |
| Riders: | 2 Cleanings | | | | |
| Vision: | VSP 2 | \$5.13 | Single: 6 | \$4.39 | \$4.48 |
| | | \$11.03 | 2-Person: 6 | \$9.43 | \$9.63 |
| | | \$16.59 | Family: 7 | \$14.18 | \$14.48 |

NON-PAK COBRA RATES:

| | | | |
|------------------|----------|------------|------------|
| MESSA ABC Plan 1 | Single | \$669.91 | \$684.38 |
| | 2-Person | \$1,507.30 | \$1,539.86 |
| | Family | \$1,875.75 | \$1,916.27 |
| MESSA Choices | Single | \$750.36 | \$766.57 |
| | 2-Person | \$1,688.30 | \$1,724.77 |
| | Family | \$2,100.99 | \$2,146.37 |

The COBRA rates for Dental and Vision are the same as the rates above.

The above rates are effective 07/01/2017 through 12/31/2018 and based on plans and enrollment as of 03/17/2017. Rates will be effective for 18 months for plans which remain in compliance with MESSA Underwriting and Rating guidelines. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plan may require re-calculation of rates.



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| PAK A - 584B Teachers | | 2016-17 Rates without Taxes | Enrollment | 2017-18 Rates without Taxes | 2017-18 Rates with Taxes |
|--|--------------------------|--|-------------------|--|-------------------------------------|
| Medical: | MESSA Choices | \$637.67 | Single: 8 | \$736.85 | \$752.73 |
| IN Deductible: | \$500/\$1000 | \$1,432.88 | 2-Person: 1 | \$1,656.03 | \$1,691.77 |
| IN Coinsurance: | N/A | \$1,782.76 | Family: 11 | \$2,060.47 | \$2,104.94 |
| IN Copay (OV/UC/ER): | \$20/\$25/\$50 | | | | |
| Rx Coverage: | Saver Rx | | | | |
| Riders Included: | None | | | | |
| Dental: | | \$27.60 | Single: 8 | \$26.92 | \$27.40 |
| Class I: | 80% | \$55.65 | 2-Person: 1 | \$54.96 | \$55.94 |
| Class II: | 80% | \$107.76 | Family: 11 | \$107.96 | \$109.89 |
| Class III: | 80% | | | | |
| Annual Max: | \$1,000 | | | | |
| Class IV: | 80% | | | | |
| Lifetime Max: | \$2,000 | | | | |
| Riders: | 2 Cleanings, Adult Ortho | | | | |
| Vision: | VSP 3 Plus | \$10.02 | Single: 8 | \$10.45 | \$10.67 |
| | | \$21.54 | 2-Person: 1 | \$22.45 | \$22.93 |
| | | \$32.43 | Family: 11 | \$33.80 | \$34.53 |
| Life Insurance: | \$15,000 | | 20 | | \$0.13 |
| Rate/\$1000 | | | | | \$300,000.00 |
| Volume | | | | | \$1.95 |
| Composite: | | \$1.80 | | | \$0.03 |
| AD&D Coverage: | \$15,000 | | 20 | | \$300,000.00 |
| Rate/\$1000 | | | | | \$0.45 |
| Volume | | | | | \$0.45 |
| Composite: | | \$0.45 | | | |
| Total Monthly Rate per Member - Single | | \$677.54 | | | \$793.20 |
| Total Monthly Rate per Member - 2-Person | | \$1,512.32 | | | \$1,773.04 |
| Total Monthly Rate per Member - Family | | \$1,925.20 | | | \$2,251.76 |
| PAK A COBRA RATES: | | | | | |
| | Medical | | Single | \$735.35 | \$751.23 |
| | | | 2-Person | \$1,654.53 | \$1,690.27 |
| | | | Family | \$2,058.97 | \$2,103.44 |
| The COBRA rates for Dental and Vision are the same as the rates above. | | | | | |

The above rates are effective 07/01/2017 through 12/31/2018 and based on plans and enrollment as of 03/17/2017. Rates will be effective for 18 months for plans which remain in compliance with MESSA Underwriting and Rating guidelines. Material changes in the composition of the group such as number of enrollees, definable group, eligibility requirements or plan may require re-calculation of rates.



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| PAK B - 584B Teachers | | 2016-17 Rates without Taxes | Enrollment | 2017-18 Rates without Taxes | 2017-18 Rates with Taxes |
|--|--------------------------|--|-------------------|--|-------------------------------------|
| Dental: | | \$26.30 | Single: 0 | \$26.61 | \$27.09 |
| Class I: | 80% | \$54.72 | 2-Person: 1 | \$56.51 | \$57.52 |
| Class II: | 80% | \$105.60 | Family: 0 | \$107.80 | \$109.73 |
| Class III: | 80% | | | | |
| Annual Max: | \$1,000 | | | | |
| Class IV: | 80% | | | | |
| Lifetime Max: | \$2,000 | | | | |
| Riders: | 2 Cleanings, Adult Ortho | | | | |
| <hr/> | | | | | |
| Vision: | VSP 3 Plus | \$10.02 | Single: 0 | \$10.45 | \$10.67 |
| | | \$21.54 | 2-Person: 1 | \$22.45 | \$22.93 |
| | | \$32.43 | Family: 0 | \$33.80 | \$34.53 |
| <hr/> | | | | | |
| Life Insurance: | \$20,000 | | 1 | | |
| Rate/\$1000 | | | | | \$0.13 |
| Volume | | | | | \$20,000.00 |
| Composite: | | \$2.40 | | | \$2.60 |
| AD&D Coverage: | \$20,000 | | 1 | | |
| Rate/\$1000 | | | | | \$0.03 |
| Volume | | | | | \$20,000.00 |
| Composite: | | \$0.60 | | | \$0.60 |
| <hr/> | | | | | |
| Total Monthly Rate per Member - Single | | \$39.32 | | | \$40.96 |
| Total Monthly Rate per Member - 2-Person | | \$79.26 | | | \$83.65 |
| Total Monthly Rate per Member - Family | | \$141.03 | | | \$147.46 |

PAK B COBRA RATES:

The COBRA rates for Dental and Vision are the same as the rates above.

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| PAK C - 584B Teachers | | 2016-17 Rates without Taxes | Enrollment | 2017-18 Rates without Taxes | 2017-18 Rates with Taxes |
|--|--------------------------|--------------------------------|-------------|--------------------------------|-----------------------------|
| Medical: | MESSA ABC Plan 1 | \$574.05 | Single: 0 | \$658.01 | \$672.19 |
| IN Deductible: | \$1300 1P; \$2600 2P&FF | \$1,289.73 | 2-Person: 1 | \$1,478.65 | \$1,510.55 |
| IN Coinsurance: | N/A | \$1,604.63 | Family: 2 | \$1,839.73 | \$1,879.43 |
| IN Copay (OV/UC/ER): | N/A | | | | |
| Rx Coverage: | ABC Rx | | | | |
| Riders Included: | None | | | | |
| Dental: | | \$27.60 | Single: 0 | \$26.92 | \$27.40 |
| Class I: | 80% | \$55.65 | 2-Person: 1 | \$54.96 | \$55.94 |
| Class II: | 80% | \$107.76 | Family: 2 | \$107.96 | \$109.89 |
| Class III: | 80% | | | | |
| Annual Max: | \$1,000 | | | | |
| Class IV: | 80% | | | | |
| Lifetime Max: | \$2,000 | | | | |
| Riders: | 2 Cleanings, Adult Ortho | | | | |
| Vision: | VSP 3 Plus | \$10.02 | Single: 0 | \$10.45 | \$10.67 |
| | | \$21.54 | 2-Person: 1 | \$22.45 | \$22.93 |
| | | \$32.43 | Family: 2 | \$33.80 | \$34.53 |
| Life Insurance: | \$15,000 | | 3 | | \$0.13 |
| Rate/\$1000 | | | | | \$45,000.00 |
| Volume | | | | | \$1.95 |
| Composite: | | \$1.80 | | | \$0.03 |
| AD&D Coverage: | \$15,000 | | 3 | | \$0.03 |
| Rate/\$1000 | | | | | \$45,000.00 |
| Volume | | | | | \$0.45 |
| Composite: | | \$0.45 | | | |
| Total Monthly Rate per Member - Single | | \$613.92 | | | \$712.66 |
| Total Monthly Rate per Member - 2-Person | | \$1,369.17 | | | \$1,591.82 |
| Total Monthly Rate per Member - Family | | \$1,747.07 | | | \$2,026.25 |

PAK C COBRA RATES:

| | | | |
|---------|----------|------------|------------|
| Medical | Single | \$656.51 | \$670.69 |
| | 2-Person | \$1,477.15 | \$1,509.05 |
| | Family | \$1,838.23 | \$1,877.93 |

The COBRA rates for Dental and Vision are the same as the rates above.

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| PAK A - 584E Administration/Non-Union | | 2016-17 Rates without Taxes | Enrollment | 2017-18 Rates without Taxes | 2017-18 Rates with Taxes |
|--|---------------------------|--------------------------------|-------------|--------------------------------|-----------------------------|
| Medical: | MESSA Choices | \$685.36 | Single: 0 | \$791.98 | \$809.06 |
| IN Deductible: | \$300/\$600 | \$1,540.20 | 2-Person: 0 | \$1,780.08 | \$1,818.49 |
| IN Coinsurance: | N/A | \$1,916.32 | Family: 4 | \$2,214.85 | \$2,262.66 |
| IN Copay (OV/UC/ER): | \$10/\$25/\$50 | | | | |
| Rx Coverage: | Saver Rx | | | | |
| Riders Included: | None | | | | |
| Dental: | | \$43.08 | Single: 0 | \$40.37 | \$41.09 |
| Class I: | 100% | \$83.11 | 2-Person: 0 | \$78.02 | \$79.42 |
| Class II: | 100% | \$157.40 | Family: 4 | \$149.52 | \$152.19 |
| Class III: | 80% | | | | |
| Annual Max: | \$2,500 | | | | |
| Class IV: | 80% | | | | |
| Lifetime Max: | \$2,500 | | | | |
| Riders: | 2 Cleanings | | | | |
| Vision: | VSP 3 Plus | \$10.02 | Single: 0 | \$10.45 | \$10.67 |
| | | \$21.54 | 2-Person: 0 | \$22.45 | \$22.93 |
| | | \$32.43 | Family: 4 | \$33.80 | \$34.53 |
| Life Insurance: | \$10,000 | | 4 | | \$0.13 |
| Rate/\$1000 | | | | | \$40,000.00 |
| Volume | | | | | \$1.30 |
| Composite: | | \$1.20 | | | \$0.03 |
| AD&D Coverage: | \$10,000 | | 4 | | \$0.03 |
| Rate/\$1000 | | | | | \$40,000.00 |
| Volume | | | | | \$0.30 |
| Composite: | | \$0.30 | | | \$0.30 |
| LTD Benefit | 66 2/3% Max \$5,000 | | 4 | | |
| Max Monthly Salary: | \$7,500 | | | | |
| Waiting Period: | 90 CDMF | | | | |
| Alcohol/Drug: | Same as any other illness | | | | |
| Mental/Nervous: | Same as any other illness | | | | |
| Soc. Sec. Offset: | Family | | | | |
| Pre-Exist Cond.: | Waived | | | | |
| COLA: | No | | | | |
| Rate/\$100 | | | | | \$0.90 |
| Covered Salary | | | | | \$19,705.00 |
| Composite: | | \$41.23 | | | \$44.34 |
| Total Monthly Rate per Member - Single | | \$781.19 | | | \$906.76 |
| Total Monthly Rate per Member - 2-Person | | \$1,687.58 | | | \$1,966.78 |
| Total Monthly Rate per Member - Family | | \$2,148.88 | | | \$2,495.32 |

PAK A COBRA RATES:

| Medical | Single | 2-Person | Family |
|---------|----------|------------|------------|
| | \$790.48 | \$1,778.58 | \$2,213.35 |
| | \$807.56 | \$1,816.99 | \$2,261.16 |

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|--|---------------------------|--|-------------------|--|-------------------------------------|
| Dental: | | \$38.70 | Single: 0 | \$37.70 | \$38.37 |
| Class I: | 100% | \$76.52 | 2-Person: 0 | \$74.86 | \$76.20 |
| Class II: | 100% | \$142.32 | Family: 0 | \$143.13 | \$145.69 |
| Class III: | 80% | | | | |
| Annual Max: | \$2,500 | | | | |
| Class IV: | 80% | | | | |
| Lifetime Max: | \$2,500 | | | | |
| Riders: | 2 Cleanings | | | | |
| <hr/> | | | | | |
| Vision: | VSP 3 Plus | \$10.02 | Single: 0 | \$10.45 | \$10.67 |
| | | \$21.54 | 2-Person: 0 | \$22.45 | \$22.93 |
| | | \$32.43 | Family: 0 | \$33.80 | \$34.53 |
| <hr/> | | | | | |
| Life Insurance: | \$10,000 | | 0 | | |
| Rate/\$1000 | | | | | \$0.13 |
| Volume | | | | | \$0.00 |
| Composite: | | \$1.20 | | | \$1.30 |
| AD&D Coverage: | \$10,000 | | 0 | | |
| Rate/\$1000 | | | | | \$0.03 |
| Volume | | | | | \$0.00 |
| Composite: | | \$0.30 | | | \$0.30 |
| <hr/> | | | | | |
| LTD Benefit | 66 2/3% Max \$5,000 | | 0 | | |
| Max Monthly Salary: | \$7,500 | | | | |
| Waiting Period: | 90 CDMF | | | | |
| Alcohol/Drug: | Same as any other illness | | | | |
| Mental/Nervous: | Same as any other illness | | | | |
| Soc. Sec. Offset: | Family | | | | |
| Pre-Exist Cond.: | Waived | | | | |
| COLA: | No | | | | |
| Rate/\$100 | | | | | \$0.90 |
| Covered Salary | | | | | \$0.00 |
| Composite: | | \$41.23 | | | \$44.34 |
| <hr/> | | | | | |
| Total Monthly Rate per Member - Single | | \$91.45 | | | \$94.98 |
| Total Monthly Rate per Member - 2-Person | | \$140.79 | | | \$145.07 |
| Total Monthly Rate per Member - Family | | \$217.48 | | | \$226.16 |

PAK B COBRA RATES:

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