



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

Benefit Program Cost Summary Effective 10/01/2015

Reed City Public Schools
 225 W Church Ave Ste A
 Reed City, MI 49677

Group: 207D-Paraprofessionals, 207E-Office, Mechanic, Monitor
NOTE: Rates and Volumes given below are based on the combined enrollment from all of the groups listed above.

Employer ID: 207
MESSA Field Rep: Kirk Bascom

Job	FT/PT Eligibility Rule ID
Paraprofessional - 200013	FT/PT 207D
Job	FT/PT Eligibility Rule ID
Teaching Assistant - 200014	FT/PT 207D

Plan	Brief Description	Census Used	Rate	MESSA Codes
Dental Dent80/80/80/80:1500/1000:2 0611-0017	Class I: 80%			D0216K
	Class II: 80%			
	Class III: 80%			
	Class IV: 80%			
	Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,500			
	X-Rays paid under: Class II			
	Adult Orthodontics: No	Single: 2	32.67	32UT
	Sealants: No	2-Person: 4	65.59	32UU
	Cleanings: 2 per year	Family: 6	113.84	32UV
Vision VSP 3	Plan year July to July	Single: 2	6.88	V31J 32UW
		2-Person: 4	14.80	32UX
		Family: 6	22.26	32UY
Negotiated LTD Neg LTD 60% Max \$2,500	Replacement %: 60.00	Individuals: 12	1.33	LT062G 32UZ
	Maximum Benefit: \$2,500	Volume: 23,135		
	Maximum Monthly Salary: \$4,167	Rate per 100: 1.33		
	Waiting Period: 90 Calendar Days Modified Fill			
	Alcohol/Drug: 2 Year Limitation			
	Mental/Nervous: 2 Year Limitation			
	Social Security Offset: Family			
Own Occupation: 2 years Minimum Benefit: 5%				
Survivor Income Benefit: 0 months				
Pre-Existing Conditions: Waived				
Freeze on Offsets: Yes COLA: No				
Educational Supplemental Program: No				
Negotiated Life \$30,000 Negotiated Life		Individuals: 12	0.14	N03001 32V0
		Volume: 360,000		
		Rate per 1000: 0.14		
Negotiated AD&D \$30,000 Negotiated AD&D		Individuals: 12	0.03	A03001 32V2
		Volume: 360,000		
		Rate per 1000: 0.03		

COBRA RATES:

The COBRA rates for this group are the same as the rates above.

Please refer to plan coverage booklets for a complete description of benefits.



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NOTE: Rates and Volumes given below are based on the combined enrollment from all of the groups listed above.

Employer ID: 207
MESSA Field Rep: Kirk Bascom

Job	FT/PT Eligibility Rule ID	Job	FT/PT Eligibility Rule ID
Mechanic - 180015	FT/PT 207E	Secretary - 190022	FT/PT 207E
Monitor - 190103	FT/PT 207E		

Plan	Brief Description	Census Used	Rate	MESSA Codes
Dental Dent80/80/80/80:1500/1000:2 0611-0018	Class I: 80% Class II: 80% Class III: 80% Class IV: 80% Annual Max Class I, II, III: \$1,000, Lifetime Max Class IV: \$1,500 X-Rays paid under: Class II Adult Orthodontics: No Sealants: No Cleanings: 2 per year	Single: 2 2-Person: 4 Family: 6	32.67 65.59 113.84	D0216B 32XH 32XI 32XJ
Vision VSP 3	Plan year July to July	Single: 2 2-Person: 4 Family: 6	6.88 14.80 22.26	V312 32XK 32XL 32XM
Negotiated LTD Neg LTD 60% Max \$2,500	Replacement %: 60.00 Maximum Benefit: \$2,500 Maximum Monthly Salary: \$4,167 Waiting Period: 90 Calendar Days Modified Fill Alcohol/Drug: 2 Year Limitation Mental/Nervous: 2 Year Limitation Social Security Offset: Family Own Occupation: 2 years Minimum Benefit: 5% Survivor Income Benefit: 0 months Pre-Existing Conditions: Waived Freeze on Offsets: Yes COLA: No Educational Supplemental Program: No	Individuals: 12 Volume: 23,135 Rate per 100: 1.33	1.33	LT062B 32XP
Negotiated Life \$30,000 Negotiated Life		Individuals: 12 Volume: 360,000 Rate per 1000: 0.14	0.14	N03002 32XN
Negotiated AD&D \$30,000 Negotiated AD&D		Individuals: 12 Volume: 360,000 Rate per 1000: 0.03	0.03	A03002 32XO

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**2015 Rate Renewal Exclusively for
Reed City Public Schools
Renewal Effective 07/01/2015**

Quote #: 330429
MESSA Field Rep: Kirk Bascom
Date Created: 03/27/2015

NON-PAK - 207AB Supervisors, Princ, CentOff		2014-15 Rates	Enrollment	2015-16 Rates
Life Insurance:	Volume As Enrolled	\$0.12	13	
Rate/\$1000				\$0.13
Volume				\$860,000.00
AD&D Coverage:	Volume As Enrolled	\$0.03	13	
Rate/\$1000				\$0.03
Volume				\$860,000.00

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Date Created: 03/27/2015

PAK A - 207AB Supervisors, Princ, CentOff		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA Choices	\$534.21	Single: 0	\$585.52
IN Deductible:	\$500/\$1000	\$1,200.11	2-Person: 1	\$1,315.55
IN Coinsurance:	N/A	\$1,493.10	Family: 7	\$1,636.75
IN Copay (OV/UC/ER):	\$20/\$25/\$50			
Rx Coverage:	Saver Rx			
Riders Included:	None			
Dental:		\$29.86	Single: 0	\$27.28
Class I:	80%	\$56.25	2-Person: 1	\$53.66
Class II:	80%	\$99.51	Family: 7	\$98.75
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,300			
Riders:	2 Cleanings, Adult Ortho			
Vision:	VSP 3	\$7.17	Single: 0	\$6.88
		\$15.42	2-Person: 1	\$14.80
		\$23.19	Family: 7	\$22.26
Life Insurance:	\$25,000		8	
Rate/\$1000				\$0.13
Volume				\$200,000.00
Composite:		\$3.00		\$3.25
AD&D Coverage:	\$25,000		8	
Rate/\$1000				\$0.03
Volume				\$200,000.00
Composite:		\$0.75		\$0.75
LTD Benefit	66 2/3% Max \$2,500		8	
Max Monthly Salary:	\$3,750			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond:	Waived			
COLA:	No			
Rate/\$100				\$0.59
Covered Salary				\$29,556.00
Composite:		\$22.31		\$21.80
Total Monthly Rate per Member - Single		\$597.30		\$645.48
Total Monthly Rate per Member - 2-Person		\$1,297.84		\$1,409.81
Total Monthly Rate per Member - Family		\$1,641.86		\$1,783.56

PAK A COBRA RATES:

Medical	Single	2-Person	Family
	\$584.02	\$1,314.05	\$1,635.25

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

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PAK B - 207AB Supervisors, Princ, CentOff		2014-15 Rates	Enrollment	2015-16 Rates
Dental:		\$29.09	Single: 0	\$27.87
Class I:	80%	\$54.79	2-Person: 1	\$53.97
Class II:	80%	\$96.91	Family: 4	\$96.19
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,300			
Riders:	2 Cleanings, Adult Ortho			
<hr/>				
Vision:	VSP 3	\$7.17	Single: 0	\$6.88
		\$15.42	2-Person: 1	\$14.80
		\$23.19	Family: 4	\$22.26
<hr/>				
Life Insurance:	\$30,000		5	
Rate/\$1000				\$0.13
Volume				\$150,000.00
Composite:		\$3.60		\$3.90
AD&D Coverage:	\$30,000		5	
Rate/\$1000				\$0.03
Volume				\$150,000.00
Composite:		\$0.90		\$0.90
<hr/>				
LTD Benefit	66 2/3% Max \$2,500		5	
Max Monthly Salary:	\$3,750			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.59
Covered Salary				\$18,473.00
Composite:		\$22.31		\$21.80
<hr/>				
Total Monthly Rate per Member - Single		\$63.07		\$61.35
Total Monthly Rate per Member - 2-Person		\$97.02		\$95.37
Total Monthly Rate per Member - Family		\$146.91		\$145.05

PAK B COBRA RATES:

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PAK A - 207DE Parapros,Office

		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA Choices	\$563.84	Single: 3	\$618.00
IN Deductible:	\$300/\$600	\$1,266.77	2-Person: 3	\$1,388.62
IN Coinsurance:	N/A	\$1,576.05	Family: 3	\$1,727.69
IN Copay (OV/UC/ER):	\$20/\$25/\$50			
Rx Coverage:	Saver Rx			
Riders Included:	None			
Dental:		\$32.18	Single: 3	\$32.02 ✓
Class I:	80%	\$60.54	2-Person: 3	\$64.27
Class II:	80%	\$105.24	Family: 3	\$111.57
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
Vision:	VSP 3	\$7.17	Single: 3	\$6.88 ✓
		\$15.42	2-Person: 3	\$14.80
		\$23.19	Family: 3	\$22.26
Life Insurance:	\$20,000		9	
Rate/\$1000				\$0.13
Volume				\$180,000.00
Composite:		\$2.40		\$2.60 ✓
AD&D Coverage:	\$20,000		9	
Rate/\$1000				\$0.03
Volume				\$180,000.00
Composite:		\$0.60		\$0.60 ✓
LTD Benefit	60% Max \$2,500		9	
Max Monthly Salary:	\$4,167			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$1.33
Covered Salary				\$17,351.00
Composite:		\$25.19		\$25.64 ✓
Total Monthly Rate per Member - Single		\$631.38		\$685.74
Total Monthly Rate per Member - 2-Person		\$1,370.92		\$1,496.53
Total Monthly Rate per Member - Family		\$1,732.67		\$1,890.36

PAK A COBRA RATES

Medical	Single	2-Person	Family
	\$616.50	\$1,387.12	\$1,726.19

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PAK B - 207DE Parapros,Office		2014-15 Rates	Enrollment	2015-16 Rates
Dental:		\$30.68	Single: 0	\$30.77
Class I:	80%	\$57.80	2-Person: 0	\$63.42
Class II:	80%	\$102.23	Family: 3	\$111.08
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
<hr/>				
Vision:	VSP 3	\$7.17	Single: 0	\$6.88
		\$15.42	2-Person: 0	\$14.80
		\$23.19	Family: 3	\$22.26
<hr/>				
Life Insurance:	\$30,000		3	
Rate/\$1000				\$0.13
Volume				\$90,000.00
Composite:		\$3.60		\$3.90
AD&D Coverage:	\$30,000		3	
Rate/\$1000				\$0.03
Volume				\$90,000.00
Composite:		\$0.90		\$0.90
<hr/>				
LTD Benefit	60% Max \$2,500		3	
Max Monthly Salary:	\$4,167			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$1.33
Covered Salary				\$5,784.00
Composite:		\$25.19		\$25.64
<hr/>				
Total Monthly Rate per Member - Single		\$67.54		\$68.09
Total Monthly Rate per Member - 2-Person		\$102.91		\$108.66
Total Monthly Rate per Member - Family		\$155.11		\$163.78

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 Date Created: 03/27/2015

PAK A - 207F Teachers / Counselors		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA Choices	\$534.21	Single: 9	\$585.52
IN Deductible:	\$500/\$1000	\$1,200.11	2-Person: 9	\$1,315.55
IN Coinsurance:	N/A	\$1,493.10	Family: 33	\$1,636.75
IN Copay (OV/UC/ER):	\$20/\$25/\$50			
Rx Coverage:	Saver Rx			
Riders Included:	None			
Dental:		\$28.31	Single: 10	\$27.64
Class I:	80%	\$53.38	2-Person: 9	\$54.42
Class II:	80%	\$95.58	Family: 32	\$97.79
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,300			
Riders:	2 Cleanings, Adult Ortho			
Vision:	VSP 3	\$7.17	Single: 10	\$6.88
		\$15.42	2-Person: 9	\$14.80
		\$23.19	Family: 32	\$22.26
Life Insurance:	\$25,000		51	
Rate/\$1000				\$0.13
Volume				\$1,275,000.00
Composite:		\$3.00		\$3.25
AD&D Coverage:	\$25,000		51	
Rate/\$1000				\$0.03
Volume				\$1,275,000.00
Composite:		\$0.75		\$0.75
LTD Benefit	66 2/3% Max \$2,500		51	
Max Monthly Salary:	\$3,750			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.37
Covered Salary				\$187,833.00
Composite:		\$14.45		\$13.63
Total Monthly Rate per Member - Single		\$587.89		\$637.67
Total Monthly Rate per Member - 2-Person		\$1,287.11		\$1,402.40
Total Monthly Rate per Member - Family		\$1,630.07		\$1,774.43

PAK A COBRA RATES:

Medical	Single	2-Person	Family
	\$584.02	\$1,314.05	\$1,635.25

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PAK B - 207F Teachers / Counselors		2014-15 Rates	Enrollment	2015-16 Rates
Dental:		\$26.80	Single: 0	\$26.70
Class I:	80%	\$50.65	2-Person: 4	\$52.68
Class II:	80%	\$93.16	Family: 21	\$96.16
Class III:	80%			
Annual Max:	\$1,000			
Class IV:	80%			
Lifetime Max:	\$1,300			
Riders:	2 Cleanings, Adult Ortho			
<hr/>				
Vision:	VSP 3	\$7.17	Single: 0	\$6.88
		\$15.42	2-Person: 4	\$14.80
		\$23.19	Family: 21	\$22.26
<hr/>				
Life Insurance:	\$30,000		25	
Rate/\$1000				\$0.13
Volume				\$750,000.00
Composite:		\$3.60		\$3.90
AD&D Coverage:	\$30,000		25	
Rate/\$1000				\$0.03
Volume				\$750,000.00
Composite:		\$0.90		\$0.90
<hr/>				
LTD Benefit	66 2/3% Max \$2,500		25	
Max Monthly Salary:	\$3,750			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.37
Covered Salary				\$92,075.00
Composite:		\$14.45		\$13.63
<hr/>				
Total Monthly Rate per Member - Single		\$52.92		\$52.01
Total Monthly Rate per Member - 2-Person		\$85.02		\$85.91
Total Monthly Rate per Member - Family		\$135.30		\$136.85

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