



DISCLAIMER: This document is a summary of certain plan features. It should not be interpreted as a complete comparison of the products represented.

Medical Plan Comparison

Huron School District

Administration

	CURRENT PLAN Administration with MESSA	CURRENT PLAN Administration with SET SEG BCBSM	BCBSM/FHIM SG SB HRA 2500 to School Plan II; \$5/\$25/\$50 Rx	BCBSM SG SB HSA 1250-0%; \$5/\$25/\$50 Rx	HealthPlus PPO OP DOX1 \$5 OV 10/20 Rx	HealthPlus PPO 5P DOX1 5/25 Rx
Carrier	MESSA Choices \$10/\$20	BCBSM Flexible Blue 2 (Current HSA)	BCBSM/FHIM	BCBSM	HealthPlus	HealthPlus
Rate Period	7/1/2010 - 6/30/2011	7/1/2010 - 6/30/2011	1/1/2011 - 7/1/2011	1/1/2011 - 7/1/2011	1/1/2011 - 6/30/2011	1/1/2011 - 6/30/2011
Quote Expiration Date	N/A	N/A	3/31/2011	3/31/2011	7/1/2011	7/1/2011
Purchased Plan Features	In Network	In Network	In Network	In Network	In Network	In Network
Coinsurance	0%	0%	20%	0%	0%	0%
Deductible Individual	\$0	\$1,250	\$2,500	\$1,250	\$0	\$0
Deductible Family	\$0	\$2,500	\$5,000	\$2,500	\$0	\$0
Post-Deductible Coinsurance - Individual	\$0	\$0	\$2,500	\$0	\$0	\$0
Post-Deductible Coinsurance - Family	\$0	\$0	\$5,000	\$0	\$0	\$0
Office Visit Copay	\$0*	\$0	\$40	\$0	\$5	\$5
Rx Copay	\$0	\$0	\$5/\$25/\$50	\$5/\$25/\$50	\$10/\$20	\$5/\$25
Purchased Plan Rates - Medical						
One Person (1P)	Census 1 Rates \$620.50	Census 1 Rates \$606.92	Census 2 Rates \$366.50	Census 2 Rates \$449.04	Census 2 Rates \$631.58	Census 2 Rates \$632.43
Two Person (2P)	Census 3 Rates \$1,394.25	Census 1 Rates \$1,456.63	Census 4 Rates \$879.59	Census 4 Rates \$1,077.71	Census 4 Rates \$1,419.14	Census 4 Rates \$1,421.05
Family (FF)	Census 5 Rates \$1,549.00	Census 0 Rates \$1,820.79	Census 5 Rates \$1,062.84	Census 5 Rates \$1,302.23	Census 5 Rates \$1,576.65	Census 5 Rates \$1,578.77
Rx Rates/Equiv Breakout (as applicable)						
One Person (1P)	Census 1 Rates/Equiv Included in Med	Census 1 Rates/Equiv Included in Med	Census 2 Rates/Equiv Included in Med	Census 2 Rates/Equiv Included in Med	Census 2 Rates/Equiv Included in Med	Census 2 Rates/Equiv Included in Med
Two Person (2P)	Census 3 Rates/Equiv Included in Med	Census 1 Rates/Equiv Included in Med	Census 4 Rates/Equiv Included in Med	Census 4 Rates/Equiv Included in Med	Census 4 Rates/Equiv Included in Med	Census 4 Rates/Equiv Included in Med
Family (FF)	Census 5 Rates/Equiv Included in Med	Census 0 Rates/Equiv Included in Med	Census 5 Rates/Equiv Included in Med	Census 5 Rates/Equiv Included in Med	Census 5 Rates/Equiv Included in Med	Census 5 Rates/Equiv Included in Med
Total Annual Premium	Census 9 Rates \$150,579	Census 2 Rates \$24,763	Census 11 Rates \$114,787	Census 11 Rates \$140,641	Census 11 Rates \$177,876	Census 11 Rates \$178,115
Combined Annual Premium	\$175,342	< TOTALS	< TOTALS	< TOTALS	< TOTALS	< TOTALS
Deductible & Coins Funding	Deductible Total	Deductible Total	Ded + Coins Total	Ded + Coins Total	Ded + Coins Total	Ded + Coins Total
Exposure Basis - Individual	\$0	\$1,250	\$5,000	\$1,250	\$0	\$0
Exposure Basis - Family	\$0	\$2,500	\$10,000	\$2,500	\$0	\$0
Total Exposure	\$0	\$3,750	\$100,000	\$25,000	\$0	\$0
Combined Total Exposure	\$3,750	< TOTALS	\$100,000	\$25,000	\$0	\$0
Estimated Utilization Rate	0%	100%	50%	100%	0%	0%
Additional Ded, Coins., Rx Expense	\$0	\$3,750	\$50,000	\$25,000	\$0	\$0
Combined Ded & Coins., Rx Expense	\$3,750	< TOTALS	\$50,000	\$25,000	\$0	\$0
Plan Extras Funding	Total	Total	Total	Total	Total	Total
Expected Claims Per Emp Per Month	\$0.00	\$0.00	\$35	\$0	\$0	\$0
Estimated Plan Extras Expense	PEPM Total	PEPM Total	PEPM Total	PEPM Total	PEPM Total	PEPM Total
Administration	\$0.00	\$0.00	\$21.00	\$0.00	\$0.00	\$0.00
Admin Fee	\$0	\$0	\$2,772	\$0	\$0	\$0
Combined Total Administration	\$0	\$0	\$2,772	\$0	\$0	\$0
Resulting Plan Features	In Network	In Network	In Network	In Network	In Network	In Network
Coinsurance	0%	0%	0%	0%	0%	0%
Deductible Individual	\$0	\$0	\$0	\$0	\$0	\$0
Deductible Family	\$0	\$0	\$0	\$0	\$0	\$0
Post-Deductible Coinsurance - Individual	\$0	\$0	\$0	\$0	\$0	\$0
Post-Deductible Coinsurance - Family	\$0	\$0	\$0	\$0	\$0	\$0
Office Visit Copay	\$0	\$0	\$5	\$0	\$5	\$5
Rx Copay	\$0	\$0	\$5/\$25/\$50	\$5/\$25/\$50	\$10/\$20	\$5/\$25
Total Costs	\$179,092	\$179,092	\$177,559	\$165,641	\$177,876	\$178,115
Best Case Annual Cost	\$179,092	<Totals	\$172,179	\$165,641	\$177,876	\$178,115
Estimated Annual Cost	\$179,092	<Totals	\$222,179	\$165,641	\$177,876	\$178,115
Estimated Savings - \$			\$52	\$102	\$9	\$7
Estimated Savings - %			4%	8%	1%	1%
Final Illustrative Plan Rates						
One Person (1P)	Census 1 Rates \$620.50	Census 1 Rates \$698.83	Census 2 Rates \$549.75	Census 2 Rates \$528.86	Census 2 Rates \$631.58	Census 2 Rates \$632.43
Two Person (2P)	Census 3 Rates \$1,394.25	Census 1 Rates \$1,677.22	Census 4 Rates \$1,319.37	Census 4 Rates \$1,269.28	Census 4 Rates \$1,419.14	Census 4 Rates \$1,421.05
Family (FF)	Census 5 Rates \$1,549.00	Census 0 Rates \$2,096.53	Census 5 Rates \$1,594.25	Census 5 Rates \$1,533.71	Census 5 Rates \$1,576.65	Census 5 Rates \$1,578.77

*For EHM/SB plans: Stated utilization rates are estimates and will be revisited after program utilization analysis can be obtained under the new program offerings.
*EHM/School Plans: If transitioning from another TPA, run-in claim administration will have a \$5.00 pepm for first three months and \$10.00 per claim thereafter.