



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

**2015 Rate Renewal Exclusively for
 Clinton Community Schools (411)
 (Part of Lenawee County Consortium)
 Renewal Effective 07/01/2015**

Quote #: 330785
 MESSA Field Rep: Julie Berryman Adams
 Date Created: 03/25/2015

PAK A - LCC EA, ADM, CMOP LCC EA, ADM, CMOP		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA Choices	\$489.74	Single: 12	\$550.01
IN Deductible:	\$500/\$1000	\$1,100.06	2-Person: 14	\$1,235.65
IN Coinsurance:	N/A	\$1,368.58	Family: 48	\$1,537.31
IN Copay (OV/UC/ER):	\$20/\$25/\$50			
Rx Coverage:	Saver Rx			
Riders Included:	EA1			
Dental:		\$34.39	Single: 12	\$32.59
Class I:	100%	\$64.71	2-Person: 17	\$64.68
Class II:	80%	\$117.27	Family: 45	\$118.23
Class III:	80%			
Annual Max:	\$1,500			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
Vision:	VSP 2 Silver	\$6.85	Single: 12	\$6.91
		\$14.73	2-Person: 17	\$14.85
		\$22.18	Family: 45	\$22.36
Life Insurance:	\$45,000		74	\$0.09
Rate/\$1000				\$3,330,000.00
Volume				\$4.05
Composite:	\$4.50			
AD&D Coverage:	\$45,000		74	\$0.03
Rate/\$1000				\$3,330,000.00
Volume				\$1.35
Composite:	\$1.35			
LTD Benefit	66 2/3% Max \$6,000		74	\$0.57
Max Monthly Salary:	\$9,000			\$346,666.00
Waiting Period:	90 CDMF			\$25.58
Alcohol/Drug:	Same as any other illness			
Mental/Nervous:	Same as any other illness			
Soc. Sec. Offset:	Primary			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.57
Covered Salary				\$346,666.00
Composite:	\$26.47			\$25.58
Total Monthly Rate per Member - Single		\$563.30		\$620.49
Total Monthly Rate per Member - 2-Person		\$1,211.82		\$1,346.16
Total Monthly Rate per Member - Family		\$1,540.35		\$1,708.88

PAK A COBRA RATES:

Medical	Single	2-Person	Family
	\$548.51	\$1,234.15	\$1,535.81

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

The above rates are effective 07/01/2015 and based on plans and enrollment as of 03/25/2015. Rates will be guaranteed for 12 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. These rates do not include the Michigan Claims Tax Assessment, State Premium Tax or ACA Federal Taxes/Fees that may be included on your invoice.



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PAK B - LCC EA, ADM, CMOP LCC EA, ADM, CMOP		2014-15 Rates	Enrollment	2015-16 Rates
Dental:		\$33.98	Single: 6	\$32.18
Class I:	100%	\$64.01	2-Person: 6	\$64.62
Class II:	80%	\$117.66	Family: 12	\$119.97
Class III:	80%			
Annual Max:	\$1,500			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
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Vision:	VSP 2 Silver	\$6.85	Single: 6	\$6.91
		\$14.73	2-Person: 6	\$14.85
		\$22.18	Family: 12	\$22.36
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Life Insurance:	\$50,000		24	
Rate/\$1000				\$0.09
Volume				\$1,200,000.00
Composite:		\$5.00		\$4.50
AD&D Coverage:	\$50,000		24	
Rate/\$1000				\$0.03
Volume				\$1,200,000.00
Composite:		\$1.50		\$1.50
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LTD Benefit	66 2/3% Max \$6,000		24	
Max Monthly Salary:	\$9,000			
Waiting Period:	90 CDMF			
Alcohol/Drug:	Same as any other illness			
Mental/Nervous:	Same as any other illness			
Soc. Sec. Offset:	Primary			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.57
Covered Salary				\$63,184.00
Composite:		\$26.47		\$25.58
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Total Monthly Rate per Member - Single		\$73.80		\$70.67
Total Monthly Rate per Member - 2-Person		\$111.71		\$111.05
Total Monthly Rate per Member - Family		\$172.81		\$173.91

PAK B COBRA RATES:

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PAK C - LCC EA, ADM, CMOP LCC EA, ADM, CMOP		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA ABC Plan 1	\$443.13	Single: 0	\$497.64
IN Deductible:	\$1300 1P; \$2600 2P&FF	\$995.20	2-Person: 0	\$1,117.83
IN Coinsurance:	N/A	\$1,238.08	Family: 0	\$1,390.69
IN Copay (OVI/UC/ER):	N/A			
Rx Coverage:	ABC Rx			
Riders Included:	EA1			
Dental:		\$34.39	Single: 0	\$32.59
Class I:	100%	\$64.71	2-Person: 0	\$64.68
Class II:	80%	\$117.27	Family: 0	\$118.23
Class III:	80%			
Annual Max:	\$1,500			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
Vision:	VSP 2 Silver	\$6.85	Single: 0	\$6.91
		\$14.73	2-Person: 0	\$14.85
		\$22.18	Family: 0	\$22.36
Life Insurance:	\$45,000		0	\$0.09
Rate/\$1000				\$0.00
Volume				\$4.05
Composite:	\$4.50			\$0.03
AD&D Coverage:	\$45,000		0	\$0.00
Rate/\$1000				\$1.35
Volume				\$0.57
Composite:	\$1.35			\$0.00
LTD Benefit	66 2/3% Max \$6,000		0	\$25.58
Max Monthly Salary:	\$9,000			\$26.47
Waiting Period:	90 CDMF			
Alcohol/Drug:	Same as any other illness			
Mental/Nervous:	Same as any other illness			
Soc. Sec. Offset:	Primary			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.57
Covered Salary				\$0.00
Composite:	\$26.47			\$25.58
Total Monthly Rate per Member - Single		\$516.69		\$568.12
Total Monthly Rate per Member - 2-Person		\$1,106.96		\$1,228.34
Total Monthly Rate per Member - Family		\$1,409.85		\$1,562.26

PAK C COBRA RATES:

Medical	Single	2-Person	Family
	\$496.14	\$1,116.33	\$1,389.19

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PAK D - LCC EA, ADM, CMOP LCC EA, ADM, CMOP		2014-15 Rates	Enrollment	2015-16 Rates
Medical:	MESSA ABC Plan 2	\$414.81	Single: 0	\$465.82
IN Deductible:	\$2000 1P; \$4000 2P&FF	\$931.47	2-Person: 0	\$1,046.25
IN Coinsurance:	N/A	\$1,158.78	Family: 0	\$1,301.61
IN Copay (OV/UC/ER):	N/A			
Rx Coverage:	ABC Rx			
Riders Included:	EA1			
Dental:		\$34.39	Single: 0	\$32.59
Class I:	100%	\$64.71	2-Person: 0	\$64.68
Class II:	80%	\$117.27	Family: 0	\$118.23
Class III:	80%			
Annual Max:	\$1,500			
Class IV:	80%			
Lifetime Max:	\$1,500			
Riders:	2 Cleanings			
Vision:	VSP 2 Silver	\$6.85	Single: 0	\$6.91
		\$14.73	2-Person: 0	\$14.85
		\$22.18	Family: 0	\$22.36
Life Insurance:	\$45,000		0	
Rate/\$1000				\$0.09
Volume				\$0.00
Composite:		\$4.50		\$4.05
AD&D Coverage:	\$45,000		0	
Rate/\$1000				\$0.03
Volume				\$0.00
Composite:		\$1.35		\$1.35
LTD Benefit	66 2/3% Max \$6,000		0	
Max Monthly Salary:	\$9,000			
Waiting Period:	90 CDMF			
Alcohol/Drug:	Same as any other illness			
Mental/Nervous:	Same as any other illness			
Soc. Sec. Offset:	Primary			
Pre-Exist Cond.:	Waived			
COLA:	No			
Rate/\$100				\$0.57
Covered Salary				\$0.00
Composite:		\$26.47		\$25.58
Total Monthly Rate per Member - Single		\$488.37		\$536.30
Total Monthly Rate per Member - 2-Person		\$1,043.23		\$1,156.76
Total Monthly Rate per Member - Family		\$1,330.55		\$1,473.18

PAK D COBRA RATES:

Medical	Single	\$464.32
	2-Person	\$1,044.75
	Family	\$1,300.11

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