

East Lansing, MI 48826-2560

# 2023 Rate Renewal Exclusively for Bellaire Public Schools

Rates Effective 01/01/2023 through 12/31/2023

Quote #: 351204 MESSA Field Rep: Viola Collin Date Created: 08/10/2022

Quoted Group(s): 353A - Administrator

## Medical plans

800.292.4910

Description	Benefits	Enrollme	nt	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
Plan IN Deductible:	MESSA Choices (7F) \$500/\$1000	Circular	0	¢707.40	Ф7.40.07
IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	Single: 2-Person: Family:	0 3 1	\$727.49 \$1,636.83 \$2,036.95	\$743.27 \$1,672.35 \$2,081.15
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC RX HEQ	Single: 2-Person: Family:	0 0 0	\$643.00 \$1,446.74 \$1,800.39	\$656.95 \$1,478.14 \$1,839.47
Basic Term Life with Medical Volume:	\$5,000		4	\$1.50	\$1.50

<sup>&</sup>lt;sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

#### **COBRA RATES:**

<sup>&</sup>lt;sup>2</sup>Medical Rate includes 1.335% for federal and state taxes and fees.



# 2023 Rate Renewal Exclusively for **Bellaire Public Schools**

1475 Kendale Boulevard, PO Box 2560 East Lansing, MI 48826-2560 800.292.4910

# Date Created:

Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 353A - Administrator

## Ancillary plans with medical - 4 members

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental Diag & Prev: Basic Services: Major Services: Annual Max:	00621-07 80% 80% (X-Rays) 80% \$1,500	Single: 0 2-Person: 3	\$31.94 \$67.15	\$32.61 \$68.56
Orthodontics: Lifetime Max: Riders: Plan Year:	80% \$2,900 2 Cleanings Jan-Dec	Family: 1	\$134.07	\$136.89
<b>Vision (All)*</b> Plan Year:	VSP 3 Plus 200CL Jan-Dec	Single: 0 2-Person: 3 Family: 1	\$9.55 \$20.52 \$30.89	\$8.64 \$18.55 \$27.93
Life Insurance (AII)* Volume: Total Volume: Rate/\$1,000: Composite:	1X Salary (Max of \$225,000) \$204,000	4	\$0.11 \$7.12	\$0.12 \$6.12
AD&D Coverage (AII)* Volume: Total Volume: Rate/\$1,000: Composite:	1X Salary (Max of \$225,000) \$204,000	4	\$0.03 \$1.94	\$0.03 \$1.53
LTD Benefit (AII)* Benefit: Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Own-Occupation: Pre-Exist Cond.: COLA: SS Freeze: Volume: Rate/\$100: Composite:	60% Max \$5,000 \$8,333 90 CDMF 2 Year Limitation 2 Year Limitation Family 2 years Waived No Yes \$16,536	4	\$0.58 \$30.66	\$0.76 \$31.42

Total Monthly Rate per Member: 2-Person \$126.18 \$127.39 Total Monthly Rate per Member: Family \$204.68 \$203.89

Quote #:

351204

08/10/2022

MESSA Field Rep: Viola Collin

### **COBRA RATES:**

<sup>\*</sup> Indicates total ancillary plan enrollment and volume for quoted group(s).



## 2023 Rate Renewal Exclusively for **Bellaire Public Schools**

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Quoted Group(s): 353A - Administrator

Rates Effective 01/01/2023 through 12/31/2023

Quote #: 351204 MESSA Field Rep: Viola Collin Date Created: 08/10/2022

## Ancillary plans without medical - 0 members

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental	00621-08			
Diag & Prev:	100%			
Basic Services:	90% (X-Rays)			
Major Services:	90%	Single: 0	\$34.02	\$34.73
Annual Max:	\$1,500	2-Person: 0	\$64.89	\$66.25
Orthodontics:	90%	Family: 0	\$135.38	\$138.23
Lifetime Max:	\$3,200			
Riders:	2 Cleanings			
Plan Year:	Jan-Dec			
Vision (AII)*	VSP 3 Plus 200CL	Single: 0	\$9.55	\$8.64
Plan Year:	Jan-Dec	2-Person: 3	\$20.52	\$18.55
		Family: 1	\$30.89	\$27.93
Life Insurance (AII)*				
Volume:	1X Salary (Max of \$225,000)			
Total Volume:	\$204,000	4		
Rate/\$1,000:			\$0.11	\$0.12
Composite:			\$7.12	\$6.12
AD&D Coverage (All)*				
Volume:	1X Salary (Max of \$225,000)			
Total Volume:	\$204,000	4		
Rate/\$1,000:			\$0.03	\$0.03
Composite:			\$1.94	\$1.53
LTD Benefit (AII)*				
Benefit:	60% Max \$5,000			
Max Monthly Salary:	\$8,333			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Own-Occupation:	2 years			
Pre-Exist Cond.:	Waived			
COLA:	No			
SS Freeze:	Yes			
Volume:	\$16,536	4	00.50	do =0
Rate/\$100:			\$0.58	\$0.76
Composite:			\$30.66	\$31.42
	Total Monthly Rate	ner Member: Single	\$83.29	\$82.44

Total Monthly Rate per Member: Single \$83.29 \$82.44 Total Monthly Rate per Member: 2-Person \$125.13 \$123.87 Total Monthly Rate per Member: Family \$205.99 \$205.23

### **COBRA RATES:**

<sup>\*</sup> Indicates total ancillary plan enrollment and volume for quoted group(s).



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# Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 353B - Support Staff

### Medical plans

Description	Benefits	Enrollment		2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA Choices (7F) \$500/\$1000 0% \$20/\$20/\$20 \$25/\$50 Saver Rx None	2-Person:	2 0 0	\$727.49 \$1,636.83 \$2,036.95	\$743.27 \$1,672.35 \$2,081.15
Plan IN Deductible: IN Coinsurance: OL/OV/SV Copay: UC/ER Copay: Rx Coverage: Riders:	MESSA ABC Plan 1 (7V) \$1500/\$3000 0% \$0 \$0 ABC Rx HEQ	3	0 0 1	\$643.00 \$1,446.74 \$1,800.39	\$656.95 \$1,478.14 \$1,839.47
Basic Term Life with Medical Volume:	\$5,000		3	\$1.50	\$1.50

<sup>&</sup>lt;sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

#### **COBRA RATES:**

<sup>&</sup>lt;sup>2</sup>Medical Rate includes 1.335% for federal and state taxes and fees.



# 2023 Rate Renewal Exclusively for Bellaire Public Schools

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# Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 353B - Support Staff

## **Ancillary plans**

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental	00621-06			
Diag & Prev:	80%			
Basic Services:	80% (X-Rays)			
Major Services:	80%	Single: 12	\$25.80	\$26.99
Annual Max:	\$1,000	2-Person: 3	\$52.50	\$54.56
Orthodontics:	80%	Family: 2	\$98.10	\$104.62
Lifetime Max:	\$1,300			
Riders:	2 Cleanings			
Plan Year:	Jan-Dec			
Vision	VSP 3	Single: 11	\$7.22	\$6.53
Plan Year:	Jan-Dec	2-Person: 4	\$15.49	\$14.01
		Family: 2	\$23.30	\$21.07
Life Insurance				
Volume:	\$5,000			
Total Volume:	\$85,000	17		
Rate/\$1,000:			\$0.11	\$0.12
Composite:			\$0.55	\$0.60
AD&D Coverage				
Volume:	\$5,000			
Total Volume:	\$85,000	17		
Rate/\$1,000:			\$0.03	\$0.03
Composite:			\$0.15	\$0.15
LTD Benefit				
Benefit:	60% Max \$5,000			
Max Monthly Salary:	\$8,333			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Own-Occupation:	2 years			
Pre-Exist Cond.:	Waived			
COLA:	No			
SS Freeze:	Yes			
Volume:	\$25,545	17		
Rate/\$100:			\$1.14	\$1.14
Composite:			\$22.41	\$17.13
	Total Monthly Rat	e per Member: Single	\$56.13	\$51.40

Total Monthly Rate per Member: Single \$56.13 \$51.40
Total Monthly Rate per Member: 2-Person \$91.10 \$86.45
Total Monthly Rate per Member: Family \$144.51 \$143.57

### **COBRA RATES:**



East Lansing, MI 48826-2560

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Quote #:

Date Created:

351204

08/10/2022

MESSA Field Rep: Viola Collin

Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 353C - Teacher

## Medical plans

800.292.4910

Description	Benefits	Enrollment	2022 Rate <sup>1</sup> w/ 2% Discount	2023 Rate <sup>2</sup> w/ 2% Discount
Plan	MESSA Choices (7F)			
IN Deductible:	\$500/\$1000			
IN Coinsurance:	0%	Single: 1	\$727.49	\$743.27
OL/OV/SV Copay:	\$20/\$20/\$20	2-Person: 1	\$1,636.83	\$1,672.35
UC/ER Copay:	\$25/\$50	Family: 6	\$2,036.95	\$2,081.15
Rx Coverage:	Saver Rx			
Riders:	None			
Plan	MESSA ABC Plan 1 (7V)			
IN Deductible:	\$1500/\$3000			
IN Coinsurance:	0%	Single: 1	\$643.00	\$656.95
OL/OV/SV Copay:	\$0	2-Person: 1	\$1,446.74	\$1,478.14
UC/ER Copay:	\$0	Family: 10	\$1,800.39	\$1,839.47
Rx Coverage:	ABC Rx			
Riders:	HEQ			
Basic Term Life with Medical				
Volume:	\$5,000	20	\$1.50	\$1.50

<sup>&</sup>lt;sup>1</sup>Medical Rate includes 1.490% for federal and state taxes and fees.

#### **COBRA RATES:**

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# Rates Effective 01/01/2023 through 12/31/2023

Quoted Group(s): 353C - Teacher

## **Ancillary plans**

Description	Benefits	Enrollment	2022 Rate	2023 Rate
Dental	00621-09			
Diag & Prev:	100%			
Basic Services:	90% (X-Rays)			
Major Services:	90%	Single: 6	\$33.16	\$33.85
Annual Max:	\$1,500	2-Person: 3	\$69.61	\$71.07
Orthodontics:	90%	Family: 15	\$152.52	\$155.71
Lifetime Max:	\$3,200			
Riders:	2 Cleanings, Sealants			
Plan Year:	Jan-Dec			
Vision	VSP 3 Plus 200CL	Single: 6	\$9.55	\$8.64
Plan Year:	Jan-Dec	2-Person: 3	\$20.52	\$18.55
		Family: 15	\$30.89	\$27.93
Life Insurance				
Volume:	\$50,000			
Total Volume:	\$1,200,000	24		
Rate/\$1,000:			\$0.11	\$0.12
Composite:			\$5.50	\$6.00
AD&D Coverage				
Volume:	\$50,000			
Total Volume:	\$1,200,000	24		
Rate/\$1,000:			\$0.03	\$0.03
Composite:			\$1.50	\$1.50
LTD Benefit				
Benefit:	60% Max \$5,000			
Max Monthly Salary:	\$8,333			
Waiting Period:	90 CDMF			
Alcohol/Drug:	2 Year Limitation			
Mental/Nervous:	2 Year Limitation			
Soc. Sec. Offset:	Family			
Own-Occupation:	2 years			
Pre-Exist Cond.:	Waived			
COLA:	No			
SS Freeze:	Yes			
Volume:	\$108,944	24		<b>.</b>
Rate/\$100:			\$0.37	\$0.37
Composite:			\$17.35	\$16.80
	Total Monthly Rat	e per Member: Single	\$67.06	\$66.79

Total Monthly Rate per Member: Single \$67.06 \$66.79
Total Monthly Rate per Member: 2-Person \$114.48 \$113.92
Total Monthly Rate per Member: Family \$207.76 \$207.94

### **COBRA RATES:**