



**Medical Rate Summary
Traverse Bay Area ISD
All Employees**

Assumed Effective Date: 1/1/2016

Current Plan(s) and Segment:		1P	2P	FF		Total Cost
Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 0%; \$5/\$25/\$50 Rx	Census	36	37	33		
BCBSM SB HSA \$1,300 Ded; 0%; \$5/\$25/\$50 Rx	Rate	\$431.11	\$1,026.27	\$1,281.33		\$1,149,310
Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 20%; \$10/\$40/\$80 Rx	Census	19	11	50		
BCBSM SB HSA \$1,300 Ded; 20%; \$10/\$40/\$80 Rx	Rate	\$389.56	\$926.58	\$1,156.71	\$943	\$905,154
TOTALS:		55	48	83	186	\$2,054,464

Product Name	1P Rate	2P Rate	FF Rate	Total Cost	Estimated Annual Savings
Consumers Mutual Plan Options					
CMI PPO HSA \$1,300 Ded; 0% (\$2,500 OOPM); \$10/\$40/\$80/20% Rx	\$426	\$1,022	\$1,278	\$2,142,651	-\$88,187
CMI PPO HSA \$1,300 Ded; 0% (\$3,000 OOPM); \$10/\$40/\$80/20% Rx	\$424	\$1,017	\$1,271	\$2,131,836	-\$77,371
CMI PPO HSA \$1,300 Ded; 20% (\$2,500 OOPM); \$10/\$40/\$80/20% Rx	\$395	\$949	\$1,186	\$1,988,613	\$65,851
CMI PPO HSA \$1,300 Ded; 20% (\$3,000 OOPM); \$10/\$40/\$80/20% Rx	\$388	\$932	\$1,165	\$1,954,075	\$100,390
CMI PPO \$500 Ded; 0%; \$10/\$40/\$80/20% Rx	\$469	\$1,127	\$1,408	\$2,361,152	-\$306,688
MESSA Plan Options					
MESSA Choices \$500 Ded; 0%; Saver Rx	\$516	\$1,160	\$1,443	\$2,445,522	-\$391,057
MESSA ABC Plan 1 \$1,300 Ded; 0%; ABC Rx	\$467	\$1,049	\$1,305	\$2,212,323	-\$157,859
MESSA ABC Plan 2 \$2,000 Ded; 0%; ABC Rx	\$437	\$982	\$1,221	\$2,070,645	-\$16,180
Priority Health Plan Options					
Declined to quote					
Aetna Plan Options					
Declined to quote					

Consumers Mutual:

Consumers Mutual rates include taxes and fees.

MESSA:

MESSA rates do not include the Michigan Claims Tax Assessment, State Premium Tax, or ACA Federal Taxes/Fees.



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

Traverse Bay Area ISD

Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 0%; \$5/\$25/\$50 Rx 1/1/2016 Renewal

Carrier	CURRENT PLAN		RENEWAL PLAN	
	Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 0%; \$5/\$25/\$50 Rx		BCBSM SB HSA \$1,300 Ded; 0%; \$5/\$25/\$50 Rx	
Rate Period	1/1/2015-12/31/2015		1/1/2016-12/31/2016	
Purchased Plan Features	In Network		In Network	
Deductible				
Annual Deductible 1P		\$1,300		\$1,300
Annual Deductible 2P/FF		\$2,600		\$2,600
Additional Cost After Deductible				
Coinsurance % after Deductible		0%		0%
Coinsurance \$ Limit after Ded - 1P		\$950		\$950
Coinsurance \$ Limit after Ded - 2P/FF		\$1,900		\$1,900
Maximum Out of Pocket Cost				
Max \$ Out of Pocket - 1P		\$2,250		\$2,250
Max \$ Out of Pocket - 2P/FF		\$4,500		\$4,500
Copayments				
Office Visit/Specialist		0%/0% after ded.		0%/0% after ded.
Urgent Care/ER		0%/0% after ded.		0%/0% after ded.
Chiropractic, Visit Limit/Copay		12/0% after ded.		12/0% after ded.
Rx Copay		\$5/\$25/\$50 Rx after ded.		\$5/\$25/\$50 Rx after ded.
Purchased Plan Rates - Medical	Census	Rates	Census	Rates
One Person (1P)	36	\$431.11	36	\$437.10
Two Person (2P)	37	\$1,026.27	37	\$1,039.22
Family (FF)	33	\$1,281.33	33	\$1,297.29
Total Annual Premium	106	\$1,149,310	106	\$1,163,968
Total Costs			PEPM	Annual
Estimated Annual Cost		\$1,149,310		\$1,163,968
Estimated Savings/(Increase) \$				(\$14,657.64)
Estimated Difference %				-1.3%
Single (yearly amounts)				
Single Taxes and Fees		\$252.12		\$269.28
Total Plan Cost		\$5,425.44		\$5,514.48
PA 152 Hard Cap		\$5,992.30		\$6,142.11
Amount Over/Under		-\$566.86		-\$627.63
Two Person (yearly amounts)				
Two Person Taxes and Fees		586.92		646.44
Total Plan Cost		\$12,902.16		\$13,117.08
PA 152 Hard Cap		\$12,531.75		\$12,845.04
Amount Over/Under		\$370.41		\$272.04
Family (yearly amounts)				
Family Taxes and Fees		\$800.28		\$807.96
Total Plan Cost		\$16,176.24		\$16,375.44
PA 152 Hard Cap		\$16,342.66		\$16,751.23
Amount Over/Under		-\$166.42		-\$375.79

BCBSM:

- *Taxes and fees are estimates and are subject to change.
- *Current rates include SET SEG's \$6.00 pepm fee for billing and enrollment services.
- *Renewal rates include SET SEG's \$7.00 pepm fee for billing and enrollment services.



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

Traverse Bay Area ISD

Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 20%; \$10/\$40/\$80 Rx 1/1/2016 Renewal

Carrier	CURRENT PLAN		RENEWAL PLAN	
	Employees Enrolled in BCBSM SB HSA \$1,300 Ded; 20%; \$10/\$40/\$80 Rx		BCBSM SB HSA \$1,300 Ded; 20%; \$10/\$40/\$80 Rx	
Rate Period	1/1/2015-12/31/2015		1/1/2016-12/31/2016	
Purchased Plan Features	In Network		In Network	
Deductible				
Annual Deductible 1P	\$1,300		\$1,300	
Annual Deductible 2P/FF	\$2,600		\$2,600	
Additional Cost After Deductible				
Coinsurance % after Deductible	20%		20%	
Coinsurance \$ Limit after Ded - 1P	\$950		\$950	
Coinsurance \$ Limit after Ded - 2P/FF	\$1,900		\$1,900	
Maximum Out of Pocket Cost				
Max \$ Out of Pocket - 1P	\$2,250		\$2,250	
Max \$ Out of Pocket - 2P/FF	\$4,500		\$4,500	
Copayments				
Office Visit/Specialist	20%/20% after ded.		20%/20% after ded.	
Urgent Care/ER	20%/20% after ded.		20%/20% after ded.	
Chiropractic, Visit Limit/Copay	12 / 20% after ded.		12 / 20% after ded.	
Rx Copay	\$10/\$40/\$80 Rx after ded.		\$10/\$40/\$80 Rx after ded.	
Purchased Plan Rates - Medical	Census	Rates	Census	Rates
One Person (1P)	19	\$389.56	19	\$395.48
Two Person (2P)	11	\$926.58	11	\$939.34
Family (FF)	50	\$1,156.71	50	\$1,172.42
Total Annual Premium	80	\$905,154	80	\$917,614
Total Costs			PEPM	Annual
Estimated Annual Cost	\$905,154		\$917,614	
Estimated Savings/(Increase) \$			(\$12,460.08)	
Estimated Difference %			-1.4%	
Single (yearly amounts)				
Single Taxes and Fees	\$232.44		\$243.24	
Total Plan Cost	\$4,907.16		\$4,989.00	
PA 152 Hard Cap	\$5,992.30		\$6,142.11	
Amount Over/Under	-\$1,085.14		-\$1,153.11	
Two Person (yearly amounts)				
Two Person Taxes and Fees	539.52		583.8	
Total Plan Cost	\$11,658.48		\$11,855.88	
PA 152 Hard Cap	\$12,531.75		\$12,845.04	
Amount Over/Under	-\$873.27		-\$989.16	
Family (yearly amounts)				
Family Taxes and Fees	\$744.36		\$729.84	
Total Plan Cost	\$14,624.88		\$14,798.88	
PA 152 Hard Cap	\$16,342.66		\$16,751.23	
Amount Over/Under	-\$1,717.78		-\$1,952.35	

BCBSM:

- *Taxes and fees are estimates and are subject to change.
- *Current rates include SET SEG's \$6.00 pepm fee for billing and enrollment services.
- *Renewal rates include SET SEG's \$7.00 pepm fee for billing and enrollment services.

BCBSM Plan Design Mileage Charts -

Plan	Current Coverage (2016 Design)										New Coverage (2016 Design)																																																																																																																																																																																																																																																																																																																																						
	Community Blue 1	Community Blue 2	Community Blue 3	Community Blue 4	Community Blue 12 1000/20%	Community Blue 14 1500/20%	Community Blue 15 2500/20%	Community Blue 15 5000/20%	Community Blue 15 5000/20%	Community Blue 15 5000/20%	Simply Blue 250	Simply Blue 500	Simply Blue 1000	Simply Blue 1500	Simply Blue 2500	Simply Blue 4000	Simply Blue HRA 1000	Simply Blue HRA 1500	Simply Blue HRA 4000	Simply Blue HRA 5000	Simply Blue HSA 1250/20%	Simply Blue HSA 2000/0%	Simply Blue HSA 2000/20%	Simply Blue HSA 3000/0%	Simply Blue HSA 3000/20%	Simply Blue HSA 3500/20%	Simply Blue RC 1000	Simply Blue RC 1500	Simply Blue RC 2500	Simply Blue RC 4000	Healthy Blue Achieve 250	Healthy Blue Achieve 500	Healthy Blue Achieve 1000	Healthy Blue Achieve 1500	Healthy Blue Achieve 2000	Simply Blue HSA 4000 MVP	Simply Blue HSA 4500 MVP	Simply Blue HSA 5000 MVP																																																																																																																																																																																																																																																																																																											
Community Blue 1	\$0	N/A	0%	15%	20%	17%	26%	30%	27%	34%	39%	37%	41%	43%	46%	49%	50%	51%	52%	53%	54%	55%	56%	57%	58%	59%	60%	61%	62%	63%	64%	65%	66%	67%	68%	69%	70%	71%	72%	73%	74%	75%	76%	77%	78%	79%	80%	81%	82%	83%	84%	85%	86%	87%	88%	89%	90%	91%	92%	93%	94%	95%	96%	97%	98%	99%	100%																																																																																																																																																																																																																																																																														
Community Blue 2	\$250	\$1,000	20%	\$6,350	\$20	\$150	18%	0%	5%	2%	13%	17%	24%	28%	31%	37%	41%	44%	47%	50%	53%	56%	59%	62%	65%	68%	71%	74%	77%	80%	83%	86%	89%	92%	95%	98%	101%	104%	107%	110%	113%	116%	119%	122%	125%	128%	131%	134%	137%	140%	143%	146%	149%	152%	155%	158%	161%	164%	167%	170%	173%	176%	179%	182%	185%	188%	191%	194%	197%	200%	203%	206%	209%	212%	215%	218%	221%	224%	227%	230%	233%	236%	239%	242%	245%	248%	251%	254%	257%	260%	263%	266%	269%	272%	275%	278%	281%	284%	287%	290%	293%	296%	299%	302%	305%	308%	311%	314%	317%	320%	323%	326%	329%	332%	335%	338%	341%	344%	347%	350%	353%	356%	359%	362%	365%	368%	371%	374%	377%	380%	383%	386%	389%	392%	395%	398%	401%	404%	407%	410%	413%	416%	419%	422%	425%	428%	431%	434%	437%	440%	443%	446%	449%	452%	455%	458%	461%	464%	467%	470%	473%	476%	479%	482%	485%	488%	491%	494%	497%	500%	503%	506%	509%	512%	515%	518%	521%	524%	527%	530%	533%	536%	539%	542%	545%	548%	551%	554%	557%	560%	563%	566%	569%	572%	575%	578%	581%	584%	587%	590%	593%	596%	599%	602%	605%	608%	611%	614%	617%	620%	623%	626%	629%	632%	635%	638%	641%	644%	647%	650%	653%	656%	659%	662%	665%	668%	671%	674%	677%	680%	683%	686%	689%	692%	695%	698%	701%	704%	707%	710%	713%	716%	719%	722%	725%	728%	731%	734%	737%	740%	743%	746%	749%	752%	755%	758%	761%	764%	767%	770%	773%	776%	779%	782%	785%	788%	791%	794%	797%	800%	803%	806%	809%	812%	815%	818%	821%	824%	827%	830%	833%	836%	839%	842%	845%	848%	851%	854%	857%	860%	863%	866%	869%	872%	875%	878%	881%	884%	887%	890%	893%	896%	899%	902%	905%	908%	911%	914%	917%	920%	923%	926%	929%	932%	935%	938%	941%	944%	947%	950%	953%	956%	959%	962%	965%	968%	971%	974%	977%	980%	983%	986%	989%	992%	995%	998%	1000%

Notes:
 - Plan design impacts are on medical and pharmacy combined.
 - All design features shown are applicable to in-network employees only.
 - All design features shown are applicable to out-of-network employees only.
 - All other design features are as shown in the BCBSM Plan Design Mileage Charts.
 - All other design features are as shown in the BCBSM Plan Design Mileage Charts.
 - Plan design impacts are calculated for each medical and pharmacy option assuming no optional riders.
 - Plan design impacts are approximate and will vary for each customer based on riders selected, pharmacy coverage level, and other customer specific characteristics.
 - Healthy Blue Achieve design features shown are for the Enhanced plan only.
 - 2016 HRA and RA Combined
 - BCBSM Actuals
 - 7/8/2015

BCBSM Plan Design Mileage Charts -

Plan	Current Coverage (2016 Design)										New Coverage (2016 Design)																												
	Deductible	Embedded Coinsurance Maximum (ECM)	Coinsurance	Out-of-Pocket Maximum	Office Visit (OV) Copay	Emergency Room (ER) Copay	Community Blue 1	Community Blue 3	Community Blue 4	Community Blue 12 1000/0%	Community Blue 12 1000/20%	Community Blue 14 1500/20%	Community Blue 15 2500/0%	Community Blue 15 2500/20%	Community Blue 15 5000/0%	Community Blue 15 5000/20%	Community Blue 15 5000/30%	Simply Blue 250	Simply Blue 500	Simply Blue 1000	Simply Blue 1500	Simply Blue 2500	Simply Blue 4000	Simply Blue HRA 1000	Simply Blue HRA 1500	Simply Blue HRA 2500	Simply Blue HRA 4000	Simply Blue HRA 5000	Healthy Blue Achieve 250	Healthy Blue Achieve 500	Healthy Blue Achieve 1000	Healthy Blue Achieve 1500	Healthy Blue Achieve 2000	Simply Blue 1500 MVP					
Community Blue 1	\$0	N/A	0%	\$6,350	\$10	\$50	0%	-17%	-23%	-20%	-30%	-34%	-31%	-39%	-41%	-45%	-30%	-34%	-40%	-44%	-40%	-38%	-34%	-34%	-38%	-44%	-47%	-30%	-33%	-36%	-44%	-47%	-36%	-44%	-47%	-36%	-42%		
Community Blue 3	\$250	\$1,000	20%	\$6,350	\$20	\$150	21%	0%	-6%	-3%	-15%	-20%	-17%	-26%	-29%	-33%	-16%	-20%	-27%	-32%	-28%	-24%	-20%	-20%	-25%	-32%	-36%	-19%	-23%	-31%	-37%	-36%	-40%	-37%	-29%	-29%	-25%		
Community Blue 4	\$500	\$1,500	20%	\$6,350	\$20	\$150	25%	3%	0%	4%	-9%	-14%	-12%	-21%	-24%	-28%	-10%	-15%	-22%	-27%	-24%	-18%	-15%	-15%	-20%	-27%	-32%	-14%	-18%	-26%	-32%	-32%	-28%	-28%	-32%	-25%	-25%		
Community Blue 12 1000/0%	\$1,000	N/A	0%	\$6,350	\$30	\$150	25%	3%	4%	0%	-13%	-17%	-15%	-24%	-27%	-31%	-13%	-18%	-25%	-30%	-25%	-19%	-15%	-15%	-20%	-27%	-32%	-5%	-9%	-17%	-21%	-30%	-35%	-38%	-35%	-29%	-27%		
Community Blue 12 1000/20%	\$1,000	\$2,500	20%	\$6,350	\$30	\$150	43%	18%	10%	15%	0%	-5%	-2%	-13%	-16%	-21%	-1%	-6%	-14%	-19%	-17%	-11%	-8%	-6%	-11%	-20%	-25%	-28%	-5%	-9%	-17%	-21%	-30%	-35%	-38%	-35%	-29%	-27%	
Community Blue 14 1500/20%	\$1,500	\$2,500	20%	\$6,350	\$30	\$150	51%	24%	17%	21%	6%	0%	3%	-8%	-11%	-16%	-1%	-5%	-13%	-18%	-16%	-10%	-7%	-6%	-11%	-20%	-25%	-28%	-2%	-6%	-14%	-18%	-26%	-31%	-34%	-31%	-25%	-25%	
Community Blue 15 2500/0%	\$2,500	N/A	0%	\$6,350	\$30	\$150	46%	21%	13%	17%	2%	-3%	0%	-11%	-14%	-19%	1%	-4%	-12%	-18%	-16%	-10%	-7%	-6%	-11%	-20%	-25%	-28%	-2%	-6%	-14%	-18%	-26%	-31%	-34%	-31%	-25%	-25%	
Community Blue 15 2500/20%	\$2,500	\$5,000	0%	\$6,350	\$30	\$150	64%	36%	27%	32%	15%	9%	12%	0%	-4%	-9%	14%	8%	-1%	-7%	-16%	-13%	-7%	8%	2%	-8%	-14%	-18%	10%	4%	-8%	-16%	-21%	-24%	-27%	-24%	-18%	-15%	
Community Blue 15 5000/0%	\$2,500	\$2,500	20%	\$6,350	\$30	\$150	70%	40%	32%	37%	19%	13%	17%	4%	0%	-6%	18%	12%	2%	-4%	-13%	-7%	19%	12%	2%	-4%	-11%	-15%	14%	8%	4%	-8%	-16%	-21%	-24%	-27%	-24%	-18%	-15%
Community Blue 15 5000/20%	\$5,000	N/A	20%	\$6,350	\$30	\$150	81%	49%	40%	45%	27%	20%	24%	10%	6%	0%	26%	18%	9%	2%	-7%	-15%	25%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	5%	
Community Blue 15 5000/30%	\$5,000	N/A	30%	\$6,350	\$30	\$150	82%	50%	41%	46%	27%	21%	25%	11%	7%	1%	26%	18%	9%	2%	-7%	-15%	25%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue 250	\$250	\$2,500	20%	\$6,350	\$20	\$150	44%	19%	11%	16%	1%	-5%	-1%	-12%	-15%	-20%	0%	-5%	-13%	-19%	-16%	-10%	-7%	8%	2%	-8%	-14%	-18%	10%	4%	-8%	-16%	-21%	-24%	-27%	-24%	-18%	-15%	
Simply Blue 500	\$500	\$2,500	20%	\$6,350	\$20	\$150	51%	25%	17%	22%	6%	0%	4%	-8%	-11%	-16%	0%	-5%	-13%	-19%	-16%	-10%	-7%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue 1000	\$1,000	\$2,500	20%	\$6,350	\$30	\$150	66%	37%	29%	33%	16%	17%	21%	8%	4%	-2%	26%	18%	9%	2%	-7%	-15%	25%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue 1500	\$1,500	\$2,500	20%	\$6,350	\$30	\$150	77%	46%	37%	42%	24%	17%	21%	8%	4%	-2%	26%	18%	9%	2%	-7%	-15%	25%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue 2500	\$2,500	\$2,500	20%	\$6,350	\$30	\$150	95%	61%	51%	57%	37%	29%	34%	19%	15%	8%	47%	36%	17%	10%	0%	-9%	36%	29%	17%	10%	2%	-2%	31%	24%	24%	9%	9%	3%	3%	3%	3%	14%	
Simply Blue 4000	\$4,000	N/A	30%	\$6,350	\$30	\$150	112%	75%	64%	70%	48%	40%	45%	29%	24%	17%	16%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%		
Simply Blue HRA 1000	\$1,000	\$2,500	20%	\$6,350	\$30	\$150	52%	26%	18%	22%	7%	1%	4%	-7%	-11%	-16%	0%	-5%	-13%	-19%	-16%	-10%	-7%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue HRA 1500	\$1,500	\$2,500	20%	\$6,350	\$30	\$150	61%	33%	25%	29%	13%	7%	10%	-2%	-5%	-11%	0%	-5%	-13%	-19%	-16%	-10%	-7%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue HRA 2500	\$2,500	\$2,500	20%	\$6,350	\$30	\$150	78%	47%	37%	43%	24%	18%	22%	8%	4%	-2%	26%	18%	9%	2%	-7%	-15%	25%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%	
Simply Blue HRA 4000	\$4,000	N/A	20%	\$6,350	\$30	\$150	90%	57%	47%	53%	33%	26%	30%	16%	12%	5%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%			
Simply Blue HRA 5000	\$5,000	N/A	20%	\$6,600	\$30	\$150	99%	64%	54%	60%	40%	32%	36%	21%	17%	10%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%			
Healthy Blue Achieve 250	\$250	\$1,500	20%	\$6,350	\$20	\$150	49%	23%	16%	20%	5%	-1%	2%	-9%	-12%	-17%	0%	-1%	-9%	-16%	-13%	-7%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%		
Healthy Blue Achieve 500	\$500	\$1,500	20%	\$6,350	\$20	\$150	57%	30%	22%	26%	10%	4%	8%	-4%	-7%	-13%	0%	-1%	-9%	-16%	-13%	-7%	19%	12%	2%	-5%	-9%	21%	15%	15%	2%	-4%	-12%	-17%	-20%	-17%	6%		
Healthy Blue Achieve 1000	\$1,000	\$2,500	20%	\$6,350	\$30	\$150	79%	47%	38%	43%	25%	18%	22%	9%	5%	-1%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%			
Healthy Blue Achieve 1500	\$1,500	\$2,500	20%	\$6,350	\$30	\$150	90%	57%	47%	53%	33%	26%	30%	16%	12%	5%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%			
Healthy Blue Achieve 2000	\$2,000	\$2,500	20%	\$6,350	\$30	\$150	100%	65%	55%	61%	40%	33%	37%	22%	18%	11%	10%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%		
Simply Blue 1500 MVP	\$1,500	N/A	20%	\$4,000	\$30	\$150	72%	42%	33%	38%	20%	14%	18%	5%	1%	-5%	47%	36%	20%	9%	0%	48%	40%	27%	20%	11%	6%	42%	35%	35%	19%	11%	6%	6%	6%	23%			

- Notes:**
- Plan design impacts are on medical piece only, i.e. does not account for any pharmacy program costs
 - All design features shown are applicable to in-network, employee-only coverage
 - All Simply Blue and Simply Blue HRA plans assume tiered copays
 - Plan design impacts are calculated for each medical option assuming no optional riders
 - Plan design impacts are approximate and will vary for each customer based on riders selected, pharmacy coverage level, and other customer specific characteristics
 - Healthy Blue Achieve design features shown are for the Enhanced plan only

BCBSM Plan Design Mileage Charts -

Current Coverage (2016 Design)	New Coverage (2016 Design)												
Rx Plan	CSRxP \$10/\$40/\$80	CSRxP \$15/\$50/50%	CSRxP \$20/\$60/50%	CSRxP \$10/\$40/\$80/15%/25%	CSRxP \$15/\$50/50%/20%/25%	CSRxP \$20/\$60/50%/20%/25%	\$15/\$30/\$60 RXCM	\$10/\$40/\$80 RXCM	\$15/\$50/50%/70/\$100 RXCM	\$20/\$60/50%/80/\$100 RXCM	\$10/\$40/\$80/15%-\$150/25%-\$300 RXCM	\$15/\$50/50%-\$70-\$100/20%-\$200/25%-\$300 RXCM	\$20/\$60/50%-\$80-\$100/20%-\$200/25%-\$300 RXCM
	0%	-16%	-29%	-3%	-19%	-32%	29%	7%	-9%	-23%	4%	-12%	-26%
	19%	0%	-16%	15%	-4%	-19%	53%	27%	8%	-9%	24%	4%	-13%
	41%	19%	0%	37%	15%	-4%	82%	52%	29%	8%	48%	24%	4%
	3%	-13%	-27%	0%	-16%	-30%	33%	11%	-6%	-21%	7%	-10%	-24%
	23%	4%	-13%	20%	0%	-16%	59%	32%	12%	-6%	28%	8%	-9%
	47%	24%	4%	43%	20%	0%	90%	58%	34%	13%	54%	29%	8%
	-22%	-34%	-45%	-25%	-37%	-47%	0%	-17%	-29%	-41%	-19%	-32%	-43%
	-7%	-21%	-34%	-10%	-24%	-37%	20%	0%	-15%	-29%	-3%	-18%	-31%
	10%	-7%	-22%	7%	-11%	-25%	41%	18%	0%	-16%	15%	-4%	-19%
	31%	10%	-8%	27%	6%	-11%	68%	40%	19%	0%	36%	15%	-4%
	-4%	-19%	-32%	-7%	-22%	-35%	23%	3%	-13%	-27%	0%	-16%	-29%
	14%	-4%	-19%	11%	-7%	-23%	47%	22%	4%	-13%	19%	0%	-16%
	36%	14%	-4%	32%	10%	-8%	75%	46%	24%	4%	42%	19%	0%

Notes:

- Plan design impacts are on pharmacy piece only, i.e. does not account for any medical program costs
- Plan design impacts are calculated for each pharmacy option assuming no optional riders
- Plan design impacts are approximate and will vary for each customer based on riders selected, pharmacy coverage level, and other customer specific characteristics